

**The Royal New Zealand Society for the  
Health of Women and Children (Inc.)**

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**PLUNKET SOCIETY**

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Founded in DUNEDIN, 1907 by  
Sir Truby King C.M.G. M.G., M.B., B.Sc (Public Health Edin.)  
and LADY KING



**REPORT**  
OF THE  
**Thirty-Seventh**  
**General Conference**

Held at WELLINGTON  
4th and 5th November, 1964

Registered Office - 453 GEORGE STREET, DUNEDIN, N.1



# AIMS and OBJECTS of the Society

1. To uphold the sacredness of the body and the duty of health; to inculcate a lofty view of the responsibilities of maternity and the duty of every mother to fit herself for the perfect fulfilment of the natural calls of motherhood, both before and after child-birth, and especially to advocate and promote the breast-feeding of infants.

2. To acquire accurate information and knowledge on matters affecting the Health of Women and Children, and to disseminate such knowledge through the agency of its members, nurses and others by means of the natural handing-on from one recipient or beneficiary to another, and the use of such agencies as periodical meetings at members' houses or elsewhere, demonstrations, lectures, correspondence, newspaper articles, radio talks, pamphlets, books, etc.

3. To train specially, and to employ qualified nurses, to be called Plunket Nurses, whose duty it will be to give sound, reliable instruction, advice and assistance, gratis, to any member of the community desiring such services, on matters affecting the health and well-being of women, especially during pregnancy and while nursing infants, and on matters affecting the health and well-being of their children; and also to endeavour to educate and help parents and others in a practical way in domestic hygiene in general—all these things being done with a view to conserving the health and strength of the rising generation, and rendering both mother and offspring hardy, healthy and resistive to disease.

4. To co-operate with any present or future organizations which are working for any of the foregoing or cognate objects.

N.B.—The Society was started as a league for mutual helpfulness and mutual education, with a full recognition of the fact that, so far as motherhood and babyhood were concerned, there was need for practical reform and "going to school" on the part of all mothers in the community.

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of Women and Children (Incorporated)  
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REPORT  
of the  
Thirty-Seventh  
General Conference



Held at Wellington, 4th & 5th November,  
1964



# REPORT

OF THE

## Thirty-Seventh General Conference

OF THE

## Royal New Zealand Society for the Health of Women and Children

(Incorporated)

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HELD AT WELLINGTON, NOVEMBER 4th AND 5th, 1964

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President : Mrs. H. J. RYBURN

### DELEGATES

<b>ASHBURTON</b>	..	Mesdames T. L. Crooks, M. J. Corbitt.
<b>AUCKLAND</b>	.. ..	Mesdames W. S. Allan, H. Johnston, T. C. Kent, C. Robinson.
<b>BALCLUTHA</b>	..	Mesdames A. Coote, G. B. Butterworth.
<b>BANKS PENINSULA</b>		Mesdames M. E. Kay, A. R. Menzies.
<b>BAY OF ISLANDS</b>	..	Mesdames W. Voyce, K. J. Ashcroft.
<b>BLenheim</b>	.. ..	Mesdames I. M. Hill, J. Sowman, N. J. Perreau.
<b>CARTERTON</b>	.. ..	Mesdames I. Ordish, V. Renall.
<b>CENTRAL OTAGO</b>	..	Mesdames W. E. Jelly, J. Bilton.
<b>CHRISTCHURCH</b>	..	Mesdames N. M. Peryer, J. W. Niven, W. R. M. Stewart, S. McLaughlan, M. Taylor, E. Andrews, B. E. Gilmour, E. M. Cocks, A. Basan.
<b>COASTAL TOWNS</b>	..	Mesdames J. Best, A. Calvert.
<b>DANNEVIRKE</b>	..	Mesdames G. W. L. Bourne, R. J. McKenzie
<b>DARGAVILLE</b>	..	Mrs. V. Mann.
<b>DEVONPORT</b>	..	Mesdames L. Segar, J. Burnett.
<b>DUNEDIN</b>	.. ..	Mesdames C. Deaker, J. S. T. Smith, M. A. Walsh, T. Hollebon, D. MacLean, W. Banwell, E. Crighton, D. Temple, H. Saunders, L. J. Chapman.
<b>EAST COAST BAYS</b>		Mesdames V. Hynes, R. Polglaze-James.
<b>ELTHAM</b>	.. ..	Mesdames G. Cassels, N. Brown.
<b>FEILDING</b>	.. ..	Mesdames R. Darragh, K. Smith.



FRANKLIN	..	..	Mrs. E. Harvey.
GERALDINE	..	..	Mrs. J. Gray.
GISBORNE	..	..	Mesdames J. Francis, L. E. Rasmussen, E. E. Wauchop.
GLEN INNES	..	..	Mrs. D. Allan.
GORE	..	..	Mesdames J. Howard, J. White.
GREEN ISLAND DISTRICT	..	..	Mesdames J. R. Aburn, D. M. Hessian.
GREYMOUTH	..	..	Mesdames D. M. Parfitt, E. Kehoe, P. P. Joyce.
HAMILTON	..	..	Mesdames P. Mowbray, J. Bruce, Petchell, J. R. Martyn, G. J. Phillips.
HASTINGS	..	..	Mesdames J. H. Holderness, M. J. Hay, A. L. Harper, E. M. Morrison.
HAWERA	..	..	Mesdames T. U. O'Neill, W. T. Hale.
HELENSVILLE	..	..	Mesdames M. A. Frazer, L. Forrest.
HOKITIKA	..	..	Mrs. D. E. M. Thomson.
HUNTLY	..	..	Mesdames E. E. Willoughby, Rowe.
HURUNUI	..	..	Mesdames L. C. Gardiner, C. P. Dampier- Crosley.
HUTT, LOWER	..	..	Mesdames M. W. Ulrich, A. K. Maidens, J. C. Watt, E. S. Lewis, P. E. Webb, D. K. Campbell.
HUTT, UPPER	..	..	Mesdames P. Whiting, S. Buxton, O. Con- ner, H. McAndrew.
INVERCARGILL	..	..	Mesdames Ibbotson, Jennings, Gray, Pet- rie, Rogerson.
KAIAPOI	..	..	Mesdames E. C. Storer, J. E. Robertson.
KAIKOURA	..	..	Mesdames A. L. Johnston, E. H. Morriss.
KAITAIA	..	..	Mesdames E. G. Williams, J. Subritsky.
LEVIN	..	..	Mesdames G. Sorenson, H. Harvey, P. Locke.
MALVERN	..	..	Mesdames K. W. J. Hall, B. W. Halliday.
MANA	..	..	Mesdames R. Smith, A. Whyman, M. Hen- derson.
MANUREWA	..	..	Mrs. D. Allan.
MARTON	..	..	Mesdames J. Tidy, M. Grant.
MASTERTON	..	..	Mesdames Bennett, Speedy, Price.
MATAMATA	..	..	Mesdames B. Coates, J. Stanley.
MILTON	..	..	Mrs. D. M. Frengley.
MORRINSVILLE	..	..	Mrs. J. Gamble.
NAPIER	..	..	Mesdames H. R. Mathews, V. R. Brebner, A. P. Spackman.
NELSON	..	..	Mesdames S. Gully, C. F. Goldie, T. J. Hunt, B. S. Hodgkinson.
NEW PLYMOUTH	..	..	Mesdames W. Bassett, P. Wighton, D. Lobb, Palmer.

<b>NGARUAWAHIA</b>	..	Mrs. D. K. Cathro.
<b>NORTHERN SOUTH- LAND</b>	.. ..	Mesdames H. G. Ferris, C. Pearce.
<b>NORTH OTAGO</b>	..	Mesdames D. C. Innes, J. A. Grant, V. M. Budge.
<b>OPUNAKE</b>	.. ..	Mrs. O. W. Lewis.
<b>OTOROHANGA</b>	..	Mrs. F. Rogers.
<b>PAEROA</b>	.. ..	Mesdames A. Taylor, J. Gamble.
<b>PAHIATUA</b>	.. ..	Mesdames J. F. Findlay, M. Thomas.
<b>PALMERSTON</b>	..	Mesdames G. N. Bell, D. S. McDougall.
<b>PALMERSTON NORTH</b>		Mesdames W. Norris, M. Watford, J. Smith, J. Allan, N. McDonell.
<b>PANMURE-MOUNT WELLINGTON</b>		Mesdames J. Blackburn, J. Hamilton.
<b>PAPAKURA</b>	.. ..	Mesdames Zinzan, Snowden.
<b>PAPARUA</b>	.. ..	Mesdames G. Fitzharding-Jones, I. Taylor.
<b>PAPATOETOE</b>	..	Mesdames K. Lawson, K. White, A. Burnside.
<b>PATEA</b>	.. ..	Mesdames R. Hammonds, I. C. Prangnell.
<b>PETONE</b>	.. ..	Mesdames G. Krause, V. J. Bartholomew.
<b>PUTARURU</b>	.. ..	Mesdames R. H. Spargo, L. K. Bertaut.
<b>RANGIORA</b>	..	Mesdames J. M. D. Cathcart, A. G. Mathews.
<b>RIVERTON</b>	.. ..	Mrs. H. G. Watson.
<b>RODNEY</b>	.. ..	Mesdames A. Papworth, J. Robertson.
<b>ROTORUA</b>	.. ..	Mesdames McLeod, Mathias, Tague, McCullough.
<b>SOUTH WAIRARAPA</b>		Mesdames H. T. Workman, H. E. Black.
<b>SPRINGS-ELLESMERE</b>		Mesdames E. J. Hall, R. C. Blackmore.
<b>STRATFORD</b>	.. ..	Mesdames B. Good, B. Lilley, B. Walsh.
<b>TAIERI</b>	.. ..	Mesdames B. W. Ewart, J. Peat, L. Dudson.
<b>TAIHAPE</b>	.. ..	Mesdames K. Ryan, S. McNie.
<b>TAKAPUNA</b>	..	Mesdames J. Audley, J. Beattie.
<b>TAUMARUNUI</b>	..	Mrs. J. Koorey.
<b>TAUPO</b>	.. ..	Mrs Foote.
<b>TAURANGA</b>	.. ..	Mesdames A. Peters, M. Harland.
<b>TAWA-LINDEN</b>	..	Mesdames M. Fitzgerald, M. Hodson.
<b>TE AROHA</b>	.. ..	Mesdames M. Hancock, D. Grattan.
<b>TE AWAMUTU</b>	..	Mesdames E. M. Delaney, M. F. Gohns.
<b>TE KUITI</b>	.. ..	Mesdames H. Sheeran, S. Seymour.
<b>TEMUKA</b>	.. ..	Mesdames J. Mackle, H. C. Sowerby.
<b>TIMARU</b>	.. ..	Mesdames B. J. Kilgour, M. M. Wraight.
<b>TOKOROA</b>	.. ..	Mesdames J. Hassall, M. Quirke.
<b>WAIMATE</b>	.. ..	Mesdames A. G. Wigley, L. C. Jones.
<b>WAIPAWA</b>	.. ..	Mesdames I. White, D. Jolly.



<b>WAIPUKURAU</b>	..	Lady Ormond, Mrs. R. Brewer.
<b>WAIROA</b>	..	Mesdames J. Jardine, J. E. V. Simpson.
<b>WAITARA</b>	..	Mesdames F. Chittenden, P. Appleby.
<b>WANGANUI</b>	..	Mesdames L. H. Gee, I. O. Stewart, M. Wyley, A. M. Battell.
<b>WELLINGTON</b>	..	Mesdames W. B. Harvie, E. W. Clarkson, W. S. T. Till, N. G. Foothead, I. F. Fulton, H. G. Lynch, F. Clinton, V. J. Innes, E. G. Stockman, H. J. Gilmer, A. W. Morrison, N. D. Binnie, D. G. Whyte, V. Diamond.
<b>WEST OTAGO</b>	..	Mesdames G. A. Wales, T. W. Rae.
<b>WESTPORT</b>	..	Mrs. E. R. Struthers.
<b>WHANGAREI</b>	..	Mesdames J. G. Brown, P. T. Hosking.

The Royal New Zealand Society for the Health  
of Women and Children (Incorporated)  
(PLUNKET SOCIETY)

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THIRTY-SEVENTH  
GENERAL CONFERENCE

4th and 5th NOVEMBER, 1964

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The Thirty-seventh General Conference of the Society was held in St. Francis Hall, Hill Street, Wellington, on Wednesday and Thursday, November 4 and 5, 1964.

The Conference opened at 9.30 a.m. on Wednesday, 4th November.

**Mrs H. J. Ryburn** (Dominion President) presided, and offered the following prayer—"Preserve us O Lord in all our doings with Thy most gracious favour and further us with Thy continual help, through Jesus Christ our Lord, Amen."

Mrs. Ryburn welcomed to the Conference all delegates and friends, and said that it was a pleasure to welcome all. She said that the last Conference, as some would remember, was in Christchurch, and since then a lot had happened to the Society. All were present because of a common purpose, which was interest in the welfare of the women and children of New Zealand, and the fathers as well. She said she felt that the Society was continuing to go from strength to strength. It had a long and very proud record, and she was proud that over the past two years, that record had been maintained, and in some cases improved. She mentioned the building which had been going on within the Society, so far as the Karitane hospitals were concerned—Auckland, Wellington nurses' home, Dunedin and Invercargill extensive renovations, Wanganui about to start, Christchurch with practically a new hospital. Also the results of hospitals being registered as Class B. Private Hospitals. This had given the hard working hospital branches and their supporters some measure of confidence in the future. Mrs. Ryburn then went on to mention the setting up of the new Training School at Auckland. This Training School would mean, in time, that more Plunket nurses would be taking their training, with the result that some of the extras would come into the service.

There was mention at the last Conference about the shortage of Karitane nurses. The position now was that there were sufficient Karitane nurses, but a shortage of young mothers for the Mothercraft section. She asked all present to inform all young mothers of their acquaintance of the value of the Mothercraft section.

Mrs. Ryburn then introduced the Dominion Secretary, Miss M. McKechie to the meeting.



## NOTICE CALLING MEETING

The Dominion Secretary read the notice calling the Conference.

### APOLOGIES

Apologies for absence were received from the following :—Mrs. C. V. Simmons (Hawera); Mrs. N. Blomfield (Hamilton); Mrs. Worth (Otorohanga); Mrs W. Monk (Carterton); Miss L. E. Cook (Marton); Mrs Richards; Mrs Innes (Hamilton); Mrs Twist; Mrs Fenwick (Blenheim); Mrs Gould (Waipawa); Mrs Bullock (Wellington); Mrs Malcolm (Westport); Mrs Cordner (Christchurch); Mrs Ward (Napier); Mrs Henderson (Taumarunui); Mrs Barlow (Takapuna).

### ROLL CALL

The Dominion Secretary called the roll, and delegates stood as their names were announced.

### TIMEKEEPER

On the motion of **Mrs Faith** (Coastal Towns), seconded by **Mrs Gilmer** (Wellington), Mrs F. E. Clapperton (Dunedin), was appointed Timekeeper.

### TIME LIMIT

Moved by **Mrs Wraight** (Timaru), seconded by **Mrs Jones** (Waimate)—“That the mover’s time be 3 minutes, with the right of extension if the President thinks fit.”

**Carried**

**Mrs Grant** (North Otago) moved, seconded by **Mrs Peryer** (Christchurch),—“That the seconder be given 3 minutes, and all others 3 minutes, and 2 minutes for the right of reply by the mover.”

**Carried**

### MINUTES

Moved by **Mrs Webb** (Lower Hutt), seconded by **Mrs Delaney** (Te Awamutu)—“That the minutes of the Thirty-sixth General Conference, held in Christchurch on the 14th and 15th November, 1962, having been circulated to branches be taken as read and confirmed.”

**Carried**

### TRUBY KING ROSE

The Dominion President called on **Mrs Horton** (Auckland) to speak to the Conference about the Truby King Rose. Mrs Horton stated that she had hoped to have some Truby King roses to present to Lady Fergusson, but unfortunately the weather had been so bad that it had been impossible to secure the blooms. She said that she thought that the Truby King rose was something that would appeal to all. It was a wonderful gift, which had been given to the Society by Mrs Harris of Keri Keri, an amateur rose grower. Mrs Harris had propagated this rose, and had received permission from Mary Truby King to name the rose, the “Truby King” rose. Mrs Horton

went on to say that the rose grower, Mr Cutler, had said that he rose could be grown anywhere and by amateurs. It was a strong bush rose, about 4'6" with a pinky-red colour. The rose would be marketed at 10/- a bush, and the Plunket Society would receive a royalty of 4/6 on every one sold. Mrs Horton explained that Mr Cutler had said he would have available for the planting out season in 1966, 10,000 roses, and she felt that the Society owed him a debt of gratitude. Mr Cutler was undertaking this work because he believed in Plunket, and she felt that it was a wonderful gesture on his part. For the first year only, Mr Cutler would have the rights, but Mrs Horton suggested that delegates and visitors should see their local rose growers and keep them informed as the more roses ordered, the better for the Society. Mrs Horton said that members would be kept informed on the progress of the rose, and said that it was a wonderful way of supporting the Society.

In answer to a question by **Mrs Mowbray** (Hamilton) as to whether the 4/6 royalty was to go to branches or to Head Office, the President replied that the matter had not been discussed, but would be taken up with Mr Cutler, and the branches would be be informed.

On the motion of **Miss McLean** (Napier) seconded by **Mrs Spackman** (Napier) the Conference agreed that letters of thanks should be forwarded to both Mr Cutler and Mrs Harris.

### OFFICIAL OPENING

The official opening ceremony took place at 10.30 a.m.

The Dominion President welcomed Her Excellency Lady Fergusson, the Mayor and Mayoress of Wellington (Mr and Mrs Kitts), guests, members and friends of the Society. Mrs Ryburn said it was a great honour for the Society to have Lady Fergusson present at the Conference. She said that the Society only met every two years in that form, and that delegates and interested committee people came from all over New Zealand from Kaitia to the very South. She said that they were mostly busy housewives, but that somehow or other, at Conference time, they were able to arrange for friends to help with their families, and come to spend two days with the Society. She said that there was a very special reason for that—interest in the welfare of young mothers and their children and because all felt that they could play a part in helping keep them well and sturdy and happy, so that some day they would be a credit to New Zealand.

Mrs Ryburn went on to say that the Society was very proud of the fact that Sir Bernard and Lady Fergusson were Patrons of the Society, which was the Royal New Zealand Society for the Health of Women and Children, and that the Society was also very proud of its Royal Charter. Mrs Ryburn then called on Lady Fergusson to address the Conference.

"Madam President, Your Worship, distinguished visitors—you are all distinguished, as a matter of fact—so welcome to you all. Thank you very much indeed for the warm welcome that you have given me here this morning. When I was thinking over what I should say this morning, it struck me that my mother-in-law, when she was here from 1925 to 1930, although she was tremendously



interested in the work of the Plunket Society, I think she would have been very surprised at an official reception, if she had been formally introduced to somebody with the words 'Mrs Snooks, she's Plunket.' Now that has happened to me on very many occasions, and it is perfectly obvious why it should happen, and I understand absolutely what is meant by it, and, indeed, welcome it. It is a measure of the place that has been taken in the life of New Zealand today by all of you, that no further word of explanation or introduction is necessary. We have become so used to all that is offered from the work that has been built up in the past generation, that we will sometimes forget how short a time it is since Sir Truby King had to fight for what he believed in so tremendously sincerely—it is odd to think now that there was ever a day when he met with opposition and discouragement. He and those who worked with him, were wise in their generation. Looking round the whole scene in New Zealand which I have been terribly lucky and able to do beyond my wildest expectations, I really have been able to see a lot of your work and to hear even more about it. And you can be and should be congratulated on the way you carried on the responsibility that was entrusted to you.

'Plunket' and 'Karitane' are household words throughout New Zealand and even further afield too, wherever there are responsible people who are really concerned for the care and welfare of babies, mothers and children. I think that some of you will be surprised to know just how high a reputation those names do carry overseas. The tables of statistics published in your Annual Report, speak clearly even to people like me, who can't begin to understand figures, of a really tremendous programme of work because they do speak directly of lives that have been saved, of diseases that have been reduced, and of heartbreaks that have been prevented. There is another side to them too, and they present you with an almost terrifying challenge through the work that you are carrying out with the aid of every medical and scientific help and wisdom and advice possible, you are directly saving lives and are responsible for the survival of a growing number of babies each year. Most of these children, thank God, will grow up normally and into normal homes. But because of the wonders of medical care, an increasing number are growing up and having to face life with handicaps. Physical handicaps and mental handicaps. There is a most thrilling development in the work that is being done now to assist these people, children as they are now, to take their place in the life of this country in the future. It's not very long ago since those disabilities were deplored and just accepted and one had just to go on from there. Now the whole attitude has changed and there is this wonderful burgeoning interest in the training and care of these people in the object that they shall take their full place in useful life within their families and within their communities. I think I am right in saying that statistically this is a problem that is going to increase more and more, really because of the wonders of medical science and of the care that all of you are putting out into the work.

But the biggest point I want to make to you is this. In his day Sir Truby King was spurred on in his work because he saw all round him so many tragedies that he knew could be avoided, so many cases of malnutrition for which there is no excuse whatsoever. In one generation, a complete revolution really, was effected in that respect. I should think he achieved a victory way beyond his

wildest expectations, even though I understand he was a tremendously enthusiastic and optimistic man. He had another sickness which we must battle against now, it is more intangible but equally important.

We devote every loving care and skill to giving babies a healthy start in life. They have good weight charts, their mothers have been taught or are being taught sound ways, there is very close supervision of them through all the early years of their lives. Are we putting an equal amount of study and training and planning into the other and equally important part of their lives—that concerned with their character and the moral climate into which they will be reared.

It is generally accepted today, that the breakdown of family life is the biggest factor behind most of the tragedies which beset young people and lead them into trouble. If you study the figures of illegitimate births—especially into the very young age group, of children coming before the Courts in need of care and attention—of young people kicking against Society—if you study these figures you must realise, perhaps with some sense of shock, that they are compiled of cases which include every sort of home—there is no social or other barrier. We can't any of us, shelter behind the smug feeling that such things never happen to us.

You, in the Royal New Zealand Society for the Health of Women and Children, are in touch with a high proportion of young girls and young mothers, of this country and it is no exaggeration to say that it is in their hands and that they have the responsibility for the future family and moral life of this country.

They have learned to turn to you with trust, for training, for advice when harassed and worried, for congratulations when they have produced a beautiful child, fulfilled all that you have taught them of wisdom and care in following the health rules. You have a unique opportunity in influencing these mothers at a time when they will accept advice from you. You could say it is none of your business, and it isn't what you have been established to do, but I don't believe you will take this line. The challenge is too serious. There are other agencies whose purpose is to give guidance and help on these very lines, but they don't have the intimate, confiding contact that you have with each individual mother. I don't know what the ideal programme would be, but I do urge you to consider whether as part of your work, something could be developed, perhaps consultations with Churches and the organisations which are there with their specialised knowledge to tackle that side of the work. Perhaps there could be some sort of merging together.

It is clear that Sir Truby King's ambition to improve expectation of life and enjoyment of life, has achieved the results that he believed in. Now it is up to us to carry this a step further, and to seize the challenge which rings out in this statement, written by that wise man, Dr Hertz: 'The child is the perennial regenerative force in humanity, because in the child, God continually gives mankind a chance to make good its mistakes.'

I now have great pleasure in declaring your Conference open, and in hoping that during these two days of deliberation, that you will find a tremendous renewal of strength for the work that you have already done so wonderfully, and that still lies ahead of you to do in such an exciting and wonderful way. Thank you very much."



In thanking Lady Fergusson for her address, the President said—

"It is my pleasure, Lady Fergusson, to thank you on behalf of everybody here, for opening this Conference in such a charming and thought provoking manner. I think all of us here would agree with Lady Fergusson, that the child and the mother need very much more than the physical wellbeing and the Society is very conscious of this, and has always borne it in mind, because, surely, it must be very much easier for a mother who has confidence and physical wellbeing, to give her children the moral background and the support they need with things other than purely physical things.

We have wonderful ideas. We would like to do far more than we are doing. I am hoping that we will. We would like to be able to help more than we are doing—the young mothers—the young mothers to be. That very important nine months, particularly before the first baby comes. We would like to be able to do more teaching and give those mothers more help and support at that period, and we are planning just that. I thought you might be interested in that side, Lady Fergusson. Thank you again very much. Would you accept these flowers from us?"

The President then went on to say—"We have with us today many distinguished guests, and we are delighted indeed. I would like to take a moment or two to let you know who is with us, as I know you will be interested. The Mayor and Mayoress (Mr and Mrs Kitts); Mr and Mrs Nordmeyer; Mr Nordmeyer, who was Minister of Health a few years ago, is our very good friend. The Rt. Hon. Mr Walter Nash—another very good friend of ours. I have never forgotten the first time I talked to Mr Nash about Plunket. He told me something I didn't know about Plunket. He told me that when he went to Russia, one of the questions the Russians asked him was, how we ran the Plunket Society. In fact, the Russians had heard of us. I have always remembered that. We also have Mrs Riddiford, Miss Pederson (representing Miss Orbell, Director of Nursing in the Department of Health); Miss Cook (Matron of Wellington Public Hospital); Mr G. R. Lee (Dominion Advisory Member) and Mrs Lee; Dr and Mrs Tweed; Mrs Stockwell (Matron of Bowen Street Hospital); Miss Devi (Editor of New Zealand Nursing Journal); Miss Elizabeth Orbell (Director Post-Graduate Training School).

Mrs Ryburn then called on Mr Kitts to speak to the Conference.

**Mr Kitts** said that a Conference conducted by women was always different from that conducted by men. He said that soon after he came into the hall, he had heard the sound of children playing outside, and had thought how appropriate a sound it was at a Plunket Society Conference. He then said again that the atmosphere at this type of Conference was not the same kind of atmosphere as that at a Conference conducted by men. It was women who went out and tackled problems, and opposition. Men were objective, and would iron out matters in an impersonal manner, and when that was done, would set up a Royal Commission comprised of men. But with women, is was on a much more personal basis. There was no question of problems and obstacles, they just went ahead, and did what had to be done, and men had learned to keep out of their way.

Mr Kitts said—"When Kipling wrote those famous lines—"The female of the species is more deadly than the male," he should have said—"The female of the species is more direct than the male."



He said that whenever there were women, as for instance, on his own City Council, the women councillors were far more direct than the men. The men were analytical—the women personal and direct. Mr Kitts then referred to the President's mention of the Plunket Society and the Russians, and said he was sure the Russians had discovered this even more so recently on the field of athletics.

In thanking Mr Kitts for his address, Mrs Ryburn said he had put the Conference in a good frame of mind, and that the Conference was off to a good start.

The Conference then adjourned for morning tea, after which the guests withdrew.

### ANNUAL REPORT

Moved by **Mrs Webb** (Lower Hutt) seconded by **Mrs Segar** (Devonport)—“That the annual report of the Dominion Council for the year ended 31st March, 1964, be adopted.”

Carried.

### ANNUAL ACCOUNTS

Moved by **Mrs Faith** (Coastal Towns), seconded by **Mrs Delaney** (Te Awamutu)—“That the annual accounts of the Society for the year ended 31st March, 1964, be adopted.”

Carried.

### BRANCH HONORARY LIFE MEMBERSHIP

**Mrs Rogers** (Otorohanga) spoke to the following remit submitted by the Otorohanga branch—

“That a Certificate, or some form of recognition from Dominion Headquarters, be made available for presentation at the appointment of a Branch Honorary Life Member.”

Mrs Rogers said that she felt sure that most branches would like to be able to present a Life Member with some tangible form of recognition.

The motion was seconded by **Mrs Cathro** (Ngaruwahia).

The Dominion President stated that she felt that this remit was a matter for Headquarters, and asked the Dominion Secretary to speak.

**Miss McKechie** said that it was not usual for a certificate to be presented to Life Members. The normal procedure was to forward a personal letter. She said that certificates were inclined to be put away and lost, and a letter in personal terms seemed very much better. Head Office had found it difficult already to keep up with the printing of Long Service Certificates, and in any case, the cost would be a matter for consideration.

The Dominion President pointed out that as there were 106 branches, a great deal of time and money would be involved, and she suggested that these names be included in branch annual reports.

The motion was put to the Conference and **Lost**.

## COMPULSORY TUBERCULOSIS X-RAYS

Moved by **Mrs Allan** (Auckland), seconded by **Mrs Johnston** (Auckland)—

"That the Health Department be approached with a request that it be compulsory for all persons to be X-rayed for tuberculosis."

In speaking to the motion **Dr. Begg** (Director of Medical Services to the Plunket Society) said he felt that compulsion was not the way to approach the problem. He mentioned that the Christchurch Mothers' Club had, as a Club project, all arranged to have their chests X-rayed. Whereas the individual may have put it off indefinitely, as it was a Club project, all had the X-ray. It was not compulsory, it was voluntary, and all had done it. He said he felt that was a far better way than by compulsion.

The motion was put to the Conference and **lost**.

## PYJAMA PATTERN

**Mrs Jolly** (Waipawa) moved, and **Mrs White** (Waipawa) seconded,—

"That a pyjama pattern, suitable for a child over six months, be included in the Plunket patterns."

In speaking to the motion, **Mrs Jolly** produced a pair of pyjamas made from a pattern which one of the Plunket Mothers' Club members had made. **Mrs Jolly** pointed out that difficulty was experienced in buying suitable patterns for children's pyjamas, and she felt that this could very suitably be included among the Plunket patterns.

**Mrs. Brabant** (Auckland) said that she felt that any pyjama pattern should have raglan sleeves, and should be made in such a way that the garment could be added to both in length and width. Several members spoke in support of the motion, and it was generally felt that the Dominion Executive should be asked to do the best possible about arranging for a suitable pattern to be included. The motion was then put to the meeting, and **carried**.

## CRUELTY TO CHILDREN

**Mrs Horton** (Auckland) moved, and **Mrs Allan** (Auckland) seconded—

"That the Plunket Society approach the Government to investigate further into the alarming number of cases of cruelty to infants and a recommendation made for the Community to be invited to co-operate by reporting incidents to the police in an endeavour to eliminate this serious offence."

In moving the motion, **Mrs Horton** said—"No member of this audience can fail to have noticed the alarming number of cases of cruelty to children and even infants. Magistrates and Judges alike have been shocked at the inhuman callousness shown to children by their parents and have spoken of their grave concern at the number of cases reported over the last four years. In that time, tiny children have been hit with sticks, buckled straps, a vacuum cleaner steel pipe, heels of shoes and broom handles, and also



kicked unmercifully. Many children have died as a result of the dreadful injuries they have sustained and others will carry the marks, both mentally and physically for the rest of their lives. What are the causes of such bestial acts and what can be done about it? I have consulted with doctors, Child Welfare Officers and Plunket nurses and they agree that the basic reasons are:

1. The unwanted child—a mother who has had say 6 children in 5 years and has no idea of home management. These mothers need to be helped and require a very special understanding. The framework does exist but it would appear that in many cases a follow-up is needed by Social Workers as the mothers themselves are past the stage of taking the initiative.
2. The father drinking is often the cause and he vents his spleen on the nearest defenceless creature. In talking to Welfare Officers, a serious aspect is the widely held suspicion that in many instances, mothers take the blame for the fathers, knowing that a plea for mercy on their behalf will probably succeed.
3. The third and saddest of all reasons is that these parents have often received just such treatment themselves as children and consider it normal practice. What can be done to end this inhuman treatment? I believe that the Plunket Society can give a lead in alerting the consciousness of the community to these stark facts. I feel sure we can extend one influence particularly through the Nurses and Mothers' Clubs, to make individuals realise it is their duty to report these cases to the Authorities. One recent and terrible case reported by a neighbour resulted in the said neighbour being ostracised and forced to leave the neighbourhood. It's hard to credit, but it's true. I believe that the Plunket Society must co-operate with Public Health Nurses, Doctors, and Welfare Workers, in changing the public's attitude from—'It's none of my business'—to—'a defenceless child is **everyone's** business'. Neighbour's support gives mothers courage to take the child to a doctor. There are many problems to be overcome, some of them racial, and the co-operation of Maori and Island leaders would be of great importance. I believe that we should take from this Conference to the Government, a request for the co-ordinated effort by all interested in the welfare of children, to wipe this blot from our national life."

Mrs Allan (Auckland) said the Conference could not help but be stirred by the report from Mrs Horton. She said she hoped that all would be brave enough to take a stand and do something about this terrible thing, so that all women could benefit from the strength and kindness of Plunket Society members.

The Dominion President said that the remit had been discussed by Council at a meeting the day before, and they felt it was their business to see that some steps were taken to stop it.

The motion was put to the meeting and **carried unanimously.**

#### **INCREASED POWER OF WELFARE DEPARTMENT**

Moved Mrs Innes (North Otago), seconded Mrs Grant (North Otago)—

"That the Society approach the Government with a request that the Child Welfare Department be given increased power to



intervene, and if necessary, to remove any child from the custody of parents exhibiting such cruelty as may result in either death or permanent disability."

Mrs Innes said she knew there were many such cases that the Society did not hear about, mainly because of fear on the part of neighbours to report happenings of this nature. She said the police required a warrant and sometimes it was too late to act on the warrant. The whole point was the time factor, and the information must be acted upon immediately.

Mrs Grant said that the North Otago Sergeant of Police stated that the Act was already there, but was not acted on in time.

**Mrs Holderness** (Hastings) said she had discussed the matter with members of the legal profession, the Police, and also Child Welfare Officers. She had been advised that the Police or Welfare Officers must go to a Magistrate, and no matter what the hour, he would make himself readily available within ten minutes. She also pointed out the danger of petty neighbours laying complaints from spite. The Police, she said, had the power, but they must also have the co-operation of the public. Legislation could be dangerous, and the answer to this remit lay in the remit which had just been carried.

**Dr. Begg** said he agreed with Mrs Holderness that a Magistrate could deal with the matter at short notice. He said that the power was there already, if used promptly.

After prolonged discussion, the President suggested that an amendment be discussed after the luncheon adjournment, and the matter could be finalised at the afternoon sitting.

The Council adjourned for luncheon at 12.45 p.m.

#### **AFTERNOON SESSION, WEDNESDAY, NOVEMBER, 4 1964**

The Conference reassembled at 2.15 p.m.

#### **MEDICAL DIRECTOR'S ADDRESS**

The President then called on Dr. N. C. Begg, Director of Medical Services to the Society, who addressed the Conference as follows:

"I thought this afternoon, that I might discuss with you a few of the aspects of our work at present, and perhaps project some aspects and discuss them as to effects that we may see in the future. Our main aim of course hasn't changed since we started—Preventive Medicine is our main aim. It will always be our aim, but I think that we can analyse this particular subject and we can see within the framework of that analysis where we stand at the moment. How we have changed considerably in the past and how perhaps we hope to face the future years. A good many of you will be familiar with this analysis of Preventive Medicine, but I think it is an important one for us to think about. There are all sorts of aspects of it—all sorts of implications and I think that this analysis does help us to see our work in a clearer fashion. Prevention of course, is very different from treatment. Treatment deals with the individual. The individual asks for help and he is given help, the problem is not getting him to take help—he has asked for it—the spur is there—the spur is

sickness. He wants to be well. He wants his family to be well. That's no problem. But when we turn to preventive medicine the position is very different.

In preventive Medicine we are dealing with a mass of healthy people. People who are not ill—who don't intend to be ill. We have to, in some way, influence them so that they will change, often deep seated habits, attitudes and behaviour, and change them so that they will in effect, have better health themselves and give their families better health. So this is the problem in Preventive Medicine. Preventive Medicine is changing people's attitude and behaviour. This too, can be analysed into three parts.

The first part—Medical Research—where the disease is studied and a remedy provided by Medical Research.

The second part—is Health Education—where people en mass are told about the disease and are told about the methods by which they can prevent that disease if they wish to. You might think that this is the 'be all or end all' of Preventive Medicine but it isn't and I suppose an example I could give to you is that there is nobody in New Zealand who doesn't know the link between cigarette smoking and lung cancer. Yet our only response to it so far is to smoke more cigarettes. However, we have to apply this knowledge somehow. Health education obviously isn't enough. How can we derive a motive? A motive so that people will want to be well and want their families to be well. Well I think the Plunket Society has a big part to play—a most important part—and I think it plays a part in these three steps.—Medical Research—Health Education—and the Application of Medical Knowledge.

First of all—Medical Research. As you know, we have a Lady King scholar who works on various problems pertaining to the young child—a medical graduate. We have had some interesting surveys and interesting work done in this field and it will be continuing. But in addition, there is a great opportunity in our country. We are a little country with a fairly circumscribed population. Most babies are born in Maternity Hospitals and through the Plunket Society we have a very considerable cover, over 90% of all infants coming under the supervisory wing of the Society, and therefore in this country, as in perhaps no other country in the world, we have the opportunity of following through, a child or a family, or a condition, and tabulating it in a statistical fashion. The opportunities are endless and I suppose we have started something with a little bit of research that we have been attempting to do over the last 2½ years and in which I have been helped recently by Dr. A. M. Douglas, in following through 1,000 pregnancies and relating the child to the various influences that occur to the mother during that pregnancy. This is a small beginning. Let's hope that it is not finished yet because the children have not yet reached an age when they can be thoroughly assessed, but it is a beginning which points the way to what could be very valuable statistical research. Perhaps statistical research which could not be done so effectively in any other country in the world. Well that is the first point—we have a part to play. It is not our main part but it could be a useful part in the first step which is Medical Research.

The second step—Health Education—and we can subdivide this again too. Health Education of course is very important. It pro-



vides fundamental and essential knowledge about disease and prevention. You can do it in a variety of ways. We have 'Modern Mothercraft' (which I am currently rather laboriously writing again); we've got 'Plunket News,' which is beginning to prosper; we've got various Newsletters and pamphlets, all of which are valuable—but none of which, I think, change people's behaviour and attitudes. They are interesting background information and I don't think the written word can ever be much more than that. However, it is part of Health Education. Now I think a very important part of Health Education is played by our large and attractive team of Plunket nurses. I wonder if you realise that within a year, 865,000 consultations occur through the Plunket nurse. Work it out to the day as I do, and I find that 2,500 babies and pre-school children are seen every day. Now this is a lot of babies and pre-school children if they are lined up end to end, 2,500 a day. Not only that, but these mothers are seen at the time when it is best for Health Education. They are seen in the right place, in their homes frequently, and I feel that this is a very important part of our Health Education programme undertaken by a large team of devoted nurses.

But I think that at this time I might remind you that there have been very important changes in the work of our Plunket nurses and I think that it is pertinent to remark on this after the very wise and gracious words of Lady Fergusson this morning. She drew attention I think, to some of the problems that we have to face, one of which you remember was the handicapped child, the child who has some disability. Over the last five years or so, we have been orientating our work in or through the nurses towards the early diagnosis of handicap. If the diagnosis can be made early, then this is a very great help to the child because effective treatment can take place immediately when it is most effective. If treatment is delayed for some reason or other, perhaps because the diagnosis has not been made, it is never so effective. We can change the course of a child's life in the first few years of his life more easily than we can at any other time. So it is very important to have early diagnosis which of course means early diagnosis of all babies. It is a very wide net. But the Plunket nurse looks in each child for congenital dislocation of the hip; for phenylketonuria; deficiencies in hearing; deficiencies in vision; cerebral palsy; intellectual handicap of any kind; squints, speech defects, muscular disabilities, and many other aspects of medical care. I think that we should feel that this is an important service, that in a way we are beginning to try and help, not only the well child, the child who bursts with health throughout childhood and adolescence and maturity, but also the child who is handicapped or has some disability and we can help via the process of early diagnosis.

In addition to this change in orientation, we have got completely new Plunket training curriculum. The curriculum has been changed to fit in with this new concept of early diagnosis and it has also been changed to fit in with the modern concept of domiciliary care, being rather more emphasised than the hospital techniques and hospital treatments which perhaps have been used in the past. This is again, I think, an effort to make the nursing service more effective and I believe that the new training, both in Dunedin and in the very fine new Training School in Auckland, will make this



contribution of our nursing service more effective. So in Health Education we have wonderful possibilities. I am only sorry to say that in one aspect of work we are lagging behind—and that is that it is important for preventive services to have close liaison with treatment services. The General Practitioner—the family doctor—is the obvious common link between these two services.

For some years now, we have been inclined to bring the family doctor in to examine his own patients in Plunket clinics and in Nelson, you will remember some time ago, the family doctors demonstrated that this was a perfectly feasible and a very satisfactory way of combining the good offices of the family doctor and the Plunket Society. Perhaps, to some degree, as a result of this, overseas visitors have taken this particular plan back with them and such advanced units as the Child Unit in Perth, Western Australia, under Professor McDonald, have accepted this principle and there this happy combination between the family doctor and the Plunket nurse is going on with great benefit to the whole community. It is of very great regret to me that although the scheme originated here we have got no further. This scheme has been denied the people of New Zealand because of a relatively small amount of money, £35,000 maximum as sessional fees to pay these doctors has been denied us.

Now this brings us to the third step—Application of Knowledge. To change people's attitudes and behaviours, one must move in one of two directions :

- (a) By compulsion
- (b) By voluntary means.

First let us consider COMPULSION. Many New Zealanders have a quite unrealistic view of what the Government can do to change people's attitudes. The main issues of preventive medicine cannot be touched by legislation. No one can force people to eat wisely, or to take exercise or to fasten their car safety belts, or to love their children. Legislation can only be framed to stop the irresponsible acts of a minority. As an example, both local and national authorities have been unwilling to make fluoridation compulsory, as many people objected to this step. For nearly three years our Plunket nurses have been asking parents if they would like to give their children the benefits of taking fluoride tablets. An overwhelming majority have said they would like to and as a result, in that time and in many parts of the country, there has been a very exciting revolution in children's teeth. Children's teeth in New Zealand, are now good perhaps for the first time in history. But what is important I think, is the fact that if 50,000 children are demonstrating to their parents that they are well and that they have got beautiful teeth, 100,000 parents are going to show the Authorities that public opinion is with them. As soon as the Authorities feel the winds of change blowing on them, they too, will quite happily jump on the bandwagon. So, this is one way that we can prepare public opinion so that legislation becomes possible.

Another example I give you of bad legislation is the legislation of 1903 and 1939 which was aimed at eradication of hydatid disease. This was not possible. It would have meant an Inspector breathing over the shoulder of every dog owner and it was patently impossible from the start. This is why it was bad legislation. The legislation

made no effect and could have no effect on the progress of hydatid disease. Again, I think the Plunket Society played a key part—in 1957 we asked the farming community if they would take up this particular struggle. Our challenge was so accepted that within eighteen months there were 512 voluntary committees up and down the country and something fundamental and something subtle and something terribly important happened—and that was that people stopped saying “This is what they are trying to make us do” and began to say “This is what we are aiming to do.” And this extraordinary change in attitude, which alone makes effective action possible, is one of the duties and one of the obligations that the Plunket Society has, as a preliminary to legislation or compulsion.

However, laws cannot change people's hearts. I think perhaps of the Civil Rights Act in the U.S.A. No one for a moment thinks that this law will make the Southern White man love his negro neighbour. However, it will help if it becomes illegal to rob him of his Constitutional rights. And in the same way I don't think we can be certain that mothers keep poison in cupboards which are safe from their children. I think this is an attitude and behaviour which we can't do anything about with legislation. But we can support it by various other ways. One of the things that I think we should do is to ask the Government to be quite certain that all makers of dangerous liquids provide a Central Poison Register with the ingredients of their products—and this Poison Register should make it known to all hospitals and doctors who would be treating these cases, what this particular proprietary substance contains and what is the appropriate treatment and antidote for the poisoning. I feel that this is supportive but it is important and in the same way we can't get all parents to keep children from open fires. We can't get them to dress their children in pyjamas perhaps, or to use flameproof material, but I think we can help them if we make certain that they know flameproof material is available—that the flameproofing and the danger, the quality of danger is stamped on each bolt of material. That we make certain that only flame resistant clothing is imported into this country. Here again the Government can help, and I think that we should require them to do so.

These are just some of the ways in which COMPULSION can help us. But I think that you will see immediately, that all legislation can do is to change the environment. It manipulates the environment and what we have got to do in preventive medicine on many occasions, is to change the heart of the human being. To change his attitude, to change his behaviour, change his actions. And this I think is where we have a very much greater power than any Government. I think this is the real metier of the Plunket Society. In effect, the weight of public opinion is a force of very great strength. Fortunately, in mankind there is a strong tendency for people to conform to the behaviour of others. Fashions, keeping up with the Jones', what is “done” and what is “not done,” what is “U” and what is “non-U.” People tend to do as their neighbours do. This is a powerful motive for good and we should harness it for good. I perhaps could mention to you as an example, the fact that I mentioned this morning. That Christchurch Mothers' Clubs have used this “fashion” for getting their chests X-rayed as a Club project—they all had their chests X-rayed. Whereas perhaps the individual might put it off and it might be put off indefinitely,



because it was a group that was doing something, because this is the "fashion" what "is done" in this particular group, they have all had their chests X-rayed. This is the power of the "fashion" of what is done and what is not done. I wonder if you remember a year or two ago how throughout the country many people, voluntary workers, took children and clerked for Sabin vaccination clinics and arranged transport and became involved in this project to a degree where we got 90% coverage of the pre-school child, a figure which has never been approached, as far as I know, in any other country except the Iron Curtain countries where people don't have any option. I think that the enthusiasm would spread from person to person, what is done, what is not done. What is fashionable, what they were determined to do for the good of children and for the good of the community. All this spread off from one shoulder to the next. But now we find that not enough babies are going along for their Sabin vaccinations and perhaps not enough are going along for their tetanus vaccinations. Again we need to rekindle these fires. What people want to do, what they suggest and talk about to their neighbours, and through all the informal network of Society, their enthusiasm for vaccination, their enthusiasm for getting rid of tetanus. I would just mention a statistic to you. In the last ten years there have been 348 cases of tetanus—162 of them were housewives,—housewives interested in gardening. There is no need for any of these people to have got tetanus. As soldiers we all had Tet. prop. as we called it and we eliminated the disease. I think that in many communities it would be a worthwhile project to have tetanus injections advocated not only by the nurse or by the doctor, but by everybody.

But there are many ways in which you can influence the actions of people around you. One of the subjects we spoke about two years ago, do you remember in Christchurch, Dr. Robertson spoke to us about the decline in breast feeding. I believe, as did Sir Truby King, that breast feeding is important and that it provides both mother and child with the best start for a good and stable relationship and to illustrate this I will give you some figures.

In 1938 80% of mothers were breast feeding when first seen by								Plunket nurse
In 1944 70%	"	"	"	"	"	"	"	Plunket nurse
In 1956 59%	"	"	"	"	"	"	"	Plunket nurse
In 1962 48%	"	"	"	"	"	"	"	Plunket nurse
In 1963 47%	"	"	"	"	"	"	"	Plunket nurse

Whatever we have done we have been unsuccessful in checking this decline in figures. Now there are many reasons given as to why this decline goes on. I don't think that it is necessary for me to go into these here. What to do about it is more important and I have been interested recently to receive some literature from a group of mothers from Illinois in the U.S.A. who have formed a league to encourage breast feeding. They call it La Leche League. There may be some people in our Mothers' Clubs or in our groups who would be interested in breast feeding; those who would perhaps like to and those who have breast fed and a great deal could be done by these people. Do you remember two years ago we suggested that mothers perhaps would have more influence on other mothers, than any professional voice ever could. I like the literature that was sent to me by this League. I thought it would be attractive and



I thought if we got it we could provide it to anybody so interested. I felt it could be a project for Mothers' Clubs. Best of all, I think I liked it because there was no dragooning. There was no crusading and there was no campaigning. Any group of people who were interested and who wanted to know more about this subject, could get the information and talk about it in their own Circles. Nobody was suggesting that they should dragoon anybody. But I am sure in this way, with interest and with these cells of interest around the country, that we could improve the figures of breast feeding which I think would be an important step in bolstering the ordinary ties of family life.

So I think that you may feel that this is the real medium of the Plunket Society. Some of the things that we have done and many things that we can do will depend on this power of "fashion," of conforming, of precept, of teaching each other. Not listening to exhortations by some people, but talking in circles and groups of interested people up and down the country, becoming informed and each one telling her neighbour.

I have attempted this afternoon to tell you a little about some of the changes that we have already made mostly in the nursing services of the Plunket Society. We feel confident that nurses graduating from our Training Centres are better equipped for their part in helping and supporting young mothers and for detecting any deviation from normal development. But I have also tried to look to the future. May I humbly, and with diffidence, say that your most rewarding task is Preventive Medicine. I am well aware of the tremendous amount of work you do, to make it possible to employ a large number of professional workers, doctors and nurses, but there are many tasks which professional workers cannot do without your help. What Preventive Medicine needs, is the impact of health work by people, by branch, sub-branch, committee and Club members. Each unit, such as a sub-branch or a Mothers' Club, should set its eyes on some health project. Some might work for fluoridation and see that all children in that community have fluoride tablets. Others might strive to see that every child in that community had appropriate immunisation against tetanus and against poliomyelitis. Others might work locally on some kind of accident prevention. Do you remember how the Wellington group designed the electric jug holder and there is no doubt in my mind, saved many burning accidents. Couldn't a Club band together and ask a retailer to bring in the appropriate amount of flameproof material so that all their children could be safe in that community from the hazard of death and disfigurement which is made by inflammable clothes.

In addition to that, Clubs can help to set the tone of a community by the neighbourliness and helpfulness to each other. Mrs Mowbray from Hamilton was speaking to me this morning about this. I felt that what she said was very true. But what we have been thinking about up till now, with this cruelty business, is very like the treatment of disease. This is something that has come to somebody over a course of time from a variety of reasons, but it is like the treatment of disease—where do we go for prevention? Where do we go for prevention which is our real task? It is not just the physical cruelty to a child. It is the feeling behind it and often this stems from exhaustion. Often it comes from personal

relationships within a family—perhaps alcoholism. All these things which might have been helped by some neighbour at some time. And again I commend to you the feeling of the Christchurch Mothers' Clubs—where they have a 'Good Neighbour' policy in these Clubs. Where they can support each other in these crises of family life. Now this is true prevention, and in my opinion even more important than the treatment of the disease which one has to do through the Child Welfare Department.

Others again might feel it worthwhile forming a group of their members who are interested in breast feeding for further discussion. Country members, of course, all should be behind this terribly important question of Hydatid disease prevention. Above all, each one of us has an obligation to foster the best of New Zealand family life—the strength of our nation depends on the quality of our family life.

I am encouraging you to do health projects. I am encouraging you as far as possible, to take into your own hands the question of disease prevention. I was interested a week or two ago when Mrs Deaker in Dunedin stood up and said what she thought about fluoridation—"against the slings and arrows of outrageous fortune." This is the real idiom of the Plunket Society. This is what people think—and are prepared to say what they think. This is a part that I think we could all play throughout our own communities up and down the country. But this is nothing new.

Now I will read to you Rule 2 which is in each one of your Annual Reports behind the cover page. In our Aims and Objects: "To acquire accurate information and knowledge on matters affecting the health of women and children and to disseminate such knowledge through the agency of its members, nurses and others," and I underline this next sentence: "by means of the natural handing on from one recipient or beneficiary to another" and a little further down it says: "a league for mutual happiness, helpfulness and mutual education."

Don't let us ever forget that the primary reason for the Plunket Society is health education and that we as individual members of the Plunket Society, are the instruments of Health Education."

**Mrs Allan** (Waipawa) expressed the warm appreciation of the Conference for Dr. Begg's inspiring address. She said she was sure she was voicing the opinions of all when she said it gave all confidence to know that Dr. Begg was behind the Society.

**Mrs Austin** (Masterton) stated that she would like to see Dr. Begg's address recorded, so that all branches could have the benefit of hearing it. The President stated that this had already been attended to.

## INCREASED POWER OF WELFARE DEPARTMENT

The President suggested that the Conference return to the consideration of this remit.

**Mrs Holderness** (Hastings) moved the following amendment—

"That the Plunket Society is greatly disturbed at the prevalence of cruelty to young children, and urges the Government to ensure that the Police and Child Welfare Officers are fully aware of their



powers and that they be instructed to act in appropriate cases with the minimum delay."

**Mrs Grant** (North Otago) seconded the amendment.

The amendment was put to the Conference and **carried**. The amendment then became the substantive motion, and was again **carried**.

### ALTERATION TO RULES

**Mrs Craven** (Blenheim) moved—

"That the words 'Past President' be inserted in Rules No's. 7(a), 7(b), 8, 9, 11(a) after the word 'President'."

Mrs Craven stated in moving the motion, that she felt that it was essential that the Past President be a member of a branch committee because of the special knowledge which she had, and should be able to pass on to her successor. The motion was seconded by **Mrs Hill** (Blenheim).

The President stated that the question of legal and printing costs involved in the alteration would be high, and in any case, there was no rule which prevented a Past President from becoming a member of any branch committee.

The motion was put to the Conference and **lost**.

### COMBINED HEALTH DEPARTMENT AND PLUNKET SOCIETY AREAS

**Mrs Speedy** (Masterton) moved—

"That sub-branches in Combined Health Department and Plunket areas be consulted with a view to make it possible for them to send one delegate to Provincial and Biennial Conferences. All such Combined Areas are in isolated country districts, and are attached as sub-branches to the nearest branch."

The motion was seconded by **Mrs Austin** (Masterton).

The President called on Miss Mackay to explain the term 'Combined Area' since she felt that this would simplify discussion on this matter.

**Miss Mackay** then said that in some of the isolated areas of New Zealand, as listed in the Annual Report, there are very few babies, and a very limited population. It is necessary in these areas that a nursing service should be provided. It would be uneconomic and wasteful of nurse time to send a Plunket nurse into these areas once a week or once a fortnight to look after the babies, so an arrangement had been made with the Health Department where a nurse is appointed to live in the district and to do all the nursing work available there. They look after the babies and pre-school children; they attend to the school children, and they do domiciliary work. In some of the districts, it is a Plunket nurse who is employed by the Plunket Society, and time is bought by the Health Department to do the other jobs. In other districts, the Health Department appoints a Public Health Nurse, and the Plunket Branch or sub-branch pays for the time that the nurse spends caring for the children. The areas are all fairly isolated, and Miss Mackay said she felt that the nurses and the committee members there do feel

out on their own, and she felt that this remit had been raised because the Combined Areas wished to participate more than they are able to do at present in the wider work of the Plunket Society.

Mrs Austin (Masterton) said she knew that Tinui sub-branch was not asking for this remit on their own behalf. She said that Tinui sub-branch was as spread out as most of these Combined Areas are, and the main problem was that the young mothers in the area are beginning to lose touch with Plunket. The young mother feels the District Nurse is there—why should we raise money when we can get this service free.

The President stated that this was a question which the Executive was very much aware of. She said that there were about eighteen Combined Areas, and that some branches treated them as ordinary sub-branches, giving them their turn as being delegates at Conferences.

After some lengthy discussion, **Mrs Horton** (Auckland) moved as an amendment—

"That Council consider ways of integrating Combined Areas more closely into Plunket work as a whole."

Mrs Horton explained that she was doing this as she felt the important thing for these areas was to have a feeling of community work that could be lost owing to their isolation. By the same token, she was hesitant to allow them a vote, as it would put them ahead of a sub-branch which had a full time nurse. Mrs Horton then moved the amendment, which was seconded by **Mrs Grear** (Nelson). After further general discussion, the amendment was put to the Conference and **carried**, and on being put to the Conference as the substantive motion, was again **carried**.

**Mrs Speedy** (Masterton) then moved—

"That sub-branches like Tinui, with Health Department nurses, form an association to be allotted at least one or two votes per Provincial area."

The Conference then adjourned for afternoon tea.

After the adjournment, the President informed the Conference that Mrs Speedy (Masterton) had asked that her motion be withdrawn, and with the permission of the Conference, this was approved. Mrs Ryburn stated that the matter of the Combined Health Department/Plunket Society Areas would be discussed at the Provincial Conferences next year, when it was hoped that a solution would be found to the problem.

## APOLOGIES

The President said that in order to keep the opening ceremony as short as possible, she had not read out the list of invited guests, who had apologised—only the list of guests who attended. This had caused some confusion, and the list of invited guests was read out to the Conference. Mrs Ryburn then stated that apologies had been received from the Hon. Mr and Mrs D. N. McKay (Department of Health); the Matron, Bethany Maternity Hospital; the Matron, Elderslie Maternity Hospital (Upper Hutt); Miss W. Stones (Charge Sister, Wellington); Mr and Mrs Moore (Dominion Advisory Member); Mr and Mrs Malcolm Mason (Dominion Advisory Member); Mr and Mrs Blundell (Dominion Advisory Member); Dr and Mrs



Tweed; Dr and Mrs Watt; Mr and Mrs Bell; Mr and Mrs Button; Mr and Mrs McLean; Mr and Mrs Chalmers; Mr and Mrs Scott (all of the Karitane Products Society Ltd.); Miss Cook (Matron, Wellington Hospital); Mr and Mrs D. A. Hunn (Department of Health); Mr and Mrs V. N. Haase (Department of Health); Miss Audrey Orbell (Director Division of Nursing, Health Department); Dr J. A. McKay (Department of Health); Dr and Mrs Turbott (Director-General of Health); Dr and Mrs Jefcoate Harbutt; Dr and Mrs Kennedy; Dr and Mrs Blake-Palmer.

Mrs Ryburn then stated that all the local Members of Parliament had been invited and that those who could not come were Mr and Mrs Marshall; Mr and Mrs Fox; Mr and Mrs Bailey; Mr and Mrs Moohan; Mr and Mrs May and Mr Riddiford.

At this stage, a telegram was received from Mrs Blomfield reading—"Regret unable to be with you, my best wishes for a successful Conference."

Mrs Harvie (Wellington) informed the Conference that Mrs Bullock (ex-President of Wellington branch) was in hospital with a broken hip, and she had sent her regrets that she was unable to be present at the Conference. On the motion of Mrs Harvie, the Conference unanimously agreed that a letter of sympathy and good wishes be sent from the Conference to Mrs Bullock.

#### **LIFE MEMBER OF SUB-BRANCH**

**Mrs Cathcart** (Rangiora) moved that Rule 5 (c) be amended to make provision for sub-branches so that in a sub-branch where a member has given conspicuous service in the office of President, Secretary or Treasurer for at least 10 years and a faithful member of the sub-branch committee for 25 years, the sub-branch be given authority to honour such member, by electing her a life member of the sub-branch.

Mrs Cathcart explained that this remit had been brought up because a member of a sub-branch who had been recommended for this honour, had not been well enough known within the branch to be acceptable for the award, even though, for over 25 years, she had been a very active member of a sub-branch. Mrs Cathcart stated that she felt that this kind of thing could happen in a great many areas, particularly in the more scattered areas, and that the honour was a much more personal one if made from the sub-branch to whom the service had been given.

This motion was seconded by **Mrs Mathews** (Rangiora).

The Dominion Secretary explained that this matter had been discussed with the Registrar of Incorporated Societies, and also with the Solicitor for the Dominion Executive. Both men were of the opinion that this remit would not be a good thing to institute. The Registrar was definitely of the opinion that the remit would involve changes of rule, and apart from the formula of changing the rule, Honorary Life Membership of a sub-branch would not mean a great deal, as sub-branches have been known to go out of existence. He felt that the only way was for a sub-branch to apply to the parent branch, and have that person made a Life Member of the parent branch.

The President then stated that this remit, with the consequent necessity for changes of rule, would involve the Society in added expense. She then read to the Conference the rule on page 6 of the rule book, concerning Branch Honorary Life Membership. Mrs Ryburn said that she and the Dominion Secretary would discuss the remit further, and bring it up for discussion later in the Conference.

## ANNUAL REPORTS

**Mrs Norris** (Palmerston North) moved that the requirement for annual reports to be sent to Headquarters for perusal be withdrawn in the interests of reducing delay. Mrs Norris said she had no statement to make in support of this remit, which had been forwarded on the suggestion of the branch secretary. The motion was seconded by Mrs Evans (Palmerston North).

The Dominion Secretary explained that it was essential that all annual reports be sent to the Dominion Headquarters for perusal, because those reports were ultimately sent to the Health Department, and it was in the interests of the branch to make certain that no misleading information or suggestions were printed. The Dominion Secretary cited some instances where, if reports had not been approved, difficulties could have been created with the Health Department. Miss McKechie suggested that since, in any case, the accounts had to be approved, some delays were inevitable, but it was not necessary for annual reports to be held up waiting for the accounts to be audited. She suggested that as soon after March 31 as is convenient for branches, reports could be sent forward to Head Office.

The motion was put to the Conference and **lost**.

## SUB-BRANCH DELEGATES AT BRANCH MEETINGS

With the permission of the Conference, the following remit was withdrawn by Wellington branch—

"That when a delegate from a sub-branch is unable to be present at a branch meeting, the representative of the sub-branch may be eligible to vote."

## PUBLICITY MATERIAL FOR BRANCHES

**Mrs Spackman** (Napier) moved that more material of publicity value be made available to branches to publicise the Society's work. Speaking to the motion, Mrs Spackman said she felt that a great many people did not know enough about the work of the Society, and that the public who actually give donations, do not know a great deal about the actual work which the Society does. She felt that perhaps publicity could be given through "Plunket News."

The motion was seconded by **Miss McLean** (Napier).

The President informed the Conference that the Dominion Executive had already given some preliminary consideration to the printing of a leaflet which could be distributed to anyone wishing to know about the work of the Society. A draft of the proposed leaflet had been prepared, but would require to be given further thought before it could be considered acceptable. Mrs Ryburn



stated that the Dominion Secretary had been quoted £250 for the printing of 100,000 copies, but before any definite action was taken Mrs Ryburn said that she felt that Head Office would like to have an indication that branches would be prepared to circulate the leaflets. It would be most unfortunate if Head Office were to pay out the sum of £250 for leaflets and then be left with stocks on the shelves.

**Mrs Rogers** (Otorohanga) stated that she felt that most branches would be happy to support Head Office and purchase the leaflet. She said she felt that this fulfilled a great need.

The President then suggested the following amendment to the remit—

“That more material of publicity value, including the appeal leaflet, be made available to branches to publicise the Society’s work.”

Mrs Spackman agreed to withdraw the original motion in favour of the amendment. Mrs Spackman then moved and Miss McLean seconded the motion as amended. The amendment was then put as the motion, and **carried**.

### INFORMATION FOR IMMIGRANTS

**Mrs Frazer** (Helensville) moved, and **Mrs Forrest** (Helensville) seconded that immigrants be made aware before their arrival, of the Plunket services available in New Zealand.

Mrs Frazer, in speaking to the motion, said that this remit had been brought forward on the suggestion of a member of the sub-branch who was herself an immigrant, and was unaware of the benefits of Plunket before her arrival in New Zealand. It was felt that this knowledge would have been a comfort to her and to other inexperienced mothers who would be arriving in the country.

After some further discussion, the motion was put to the Conference and **carried**.

### SOCIETY’S LETTERHEADS

**Mrs Peryer** (Christchurch) moved, seconded by **Mrs Cocks** (Christchurch) that when the new letterheads are being printed “Plunket Society” take pride of place with our official title “The Royal New Zealand Society for the Health of Women and Children” printed below.

Mrs Peryer said that the Christchurch branch were not asking for any change of rule, as they were extremely proud of their Royal Charter, but, she said, it was extremely difficult to understand how many people did not seem to realise that the Royal Society for the Health of Women and Children, was in actual fact the Plunket Society. She felt that by giving prominence to the words “Plunket Society,” a good deal of confusion would be eliminated.

After some discussion on the wording of the remit, it was agreed by the mover and seconder that the words “printed below” should be omitted.

The motion was then placed in the following form—

“That when the new letterheads are being printed “Plunket

Society" take pride of place with our official title 'The Royal New Zealand Society for the Health of Women and Children'."

The motion was then put to the meeting and **carried**.

### CHANGE OF NAME

**Mrs Mann** (Dargaville) moved, seconded by **Mrs Robertson** (Whangarei) that the Conference consider alteration in the name of the Society from 'The Royal New Zealand Society for the Health of Women and Children (Incorporated)' to 'The Royal New Zealand Plunket Society (Incorporated)'. **Mrs Mann** suggested that because most people did not seem to realise that the Plunket Society was in fact The Royal New Zealand Society for the Health of Women and Children (Incorporated), a change in the name to The Royal New Zealand Plunket Society (Incorporated) would be more easily understood.

The Dominion Secretary said that a Royal Charter is something that is not lightly given. The Charter granted the Society was by favour of King George V. and a change of name would involve the Society in complicated and expensive legislation. There was also the added possibility of the Royal Charter being lost.

The President pointed out that she felt that the present title explained what the Society stood for.

The motion was then put to the Conference and **lost**.

The Conference adjourned at 5.30 p.m.

### EVENING SESSION, WEDNESDAY, NOVEMBER 4, 1964.

The Conference reassembled at 8.30 p.m.

### FINANCIAL YEAR

**Mrs Calvert** (Coastal Towns) moved, that Rule 4(a) be amended to read—

"The financial year of the branch shall commence on the first day of January and shall end on the 31st day of December each year."

In speaking to the motion, **Mrs Calvert** stated it had been brought forward by Coastal Towns on the suggestion of their auditor, who said that in the period prior to 31st March, he would have more time, and also that at the Conference of Accountants, it was agreed that if those who did voluntary work of this nature could get the Societies' books before the rush of work after 31st March, they could give more of their time. There was also the fact that returns are required for grants, such as McCarthy Trust and Sutherland Trust, early in the year. The statistical year for the Society ends on 31st December, and it was felt that it would be better if the financial and statistical year ended on the same date.

**Mrs Fitzgerald** (Tawa-Linden) asked, and was granted permission to second the motion, as the remit put forward by Tawa-Linden was similar to that under discussion.

Considerable time was spent in discussion, and the following members spoke against the motion—**Mrs Allan** (Palmerston North); **Mrs Wauchop** (Gisborne); **Mrs Dampier-Crosley** (Hurunui); **Mrs**



**Aburn** (Green Island); **Mrs Peitchell** (Hamilton); **Mrs Delaney** (Te Awamutu).

Those speaking in support of the motion were **Mrs Gee** (Wanganui); **Mrs Faith** (Coastal Towns); **Mrs Bourne** (Dannevirke); **Mrs Robertson** (Kaiapoi); **Mrs Oliver** (Hawera); **Mrs Hodson** (Tawa-Linden); **Mrs Austin** (Masterton).

It was finally agreed that the motion should be voted for by ballot, and Miss Mackay and Mrs Todd were appointed scrutineers. The result of the ballot was as follows—Against 209, For 107. The motion was therefore **lost**.

With the permission of the Conference, the voting papers were destroyed.

The Conference adjourned at 10.15 p.m.

## **MORNING SESSION, THURSDAY, NOVEMBER 5, 1964.**

The Conference reassembled at 9.30 a.m.

The President asked the Conference to give further consideration to the remit 'that Rule 5(c) be amended to make provision for sub-branches, so that in a sub-branch where a member has given conspicuous service in the office of President, Secretary or Treasurer for at least 10 years and a faithful member of the sub-branch committee for 25 years, the sub-branch be given authority to honour such a member, by electing her a life member of the sub-branch,' which had been deferred at the meeting on the previous day.

Mrs Ryburn said that the matter had been given a great deal of thought, and it was now suggested that the best way of handling it would be to seek legal opinion, and also that a solution could well be an additional, rather than a change of rule, to cover sub-branches.

With the permission of the Conference, the remit was withdrawn in the meantime, but Mrs Ryburn stated that it would be discussed at all the Provincial Conferences next year.

## **TRI-VAC INJECTIONS**

Moved by **Mrs Wighton** (New Plymouth), seconded by **Mrs Basset** (New Plymouth) that in the interests of both economy and convenience, Plunket nurses be authorised to give Tri-Vac injections to babies under their supervision in the course of their normal duties instead of mothers having to make special visits to their doctors.

In speaking to the remit, Mrs Wighton said that the reason for submitting this matter for consideration was that the mothers in some sub-branches had to travel some distance to the Plunket Rooms, and if the remit were passed, it would reduce the number of visits for these young mothers.

**Dr. Begg** then spoke to the Conference, stating that Tri-Vac was the injection for children combining diphtheria, whooping cough and tetanus. He said that it was a very good health measure, but that there were certain aspects of immunisation which required great care, in that some children reacted violently to injections of various types, and one of these was the whooping cough ingredient

in Tri-Vac. For this reason, he said, although he was sorry for those who had to travel long distances to the nearest doctor, he felt that only a doctor should give these injections, as he would be in a position to take appropriate measures in an emergency, and that no nurse should, in any case, be asked to carry such a responsibility.

The motion was then put to the Conference and **lost**.

### **SAFETY PLUGS**

**Mrs Innes** (North Otago) moved, seconded by **Mrs Grant** (North Otago) that more publicity be given to the availability of safety plugs for open power points, and that these be more readily obtainable.

**Miss Mackay** said she had a sample of the type of safety plugs available. She informed the Conference that these plugs are on the market almost everywhere and perhaps committee members could remind young mothers that they are available.

The motion was put to the Conference and **carried**.

### **HYDATID CONTROL**

The Dominion President then introduced to the Conference **Mr J. Parsons**, Deputy Chairman of the Hydatid Council. Mr Parsons then addressed the Conference.

"First of all, I do wish to thank you, Madam President, for the opportunity of coming this morning, to spend a few minutes with you to report on the progress that has been made on Hydatid eradication and our plans and intentions for the future.

It is pertinent that I should come, or a member of the Council should come to report to you, because you played such a very virile, active part, I would say one of the major efforts in bringing about hydatid eradication in New Zealand. Some five or six years ago I was privileged to sit with your then Vice-President, Mrs Simmons, to bring recommendations to the Minister of Agriculture on a National plan for hydatid eradication. That was duly done. I, in due course was chosen to represent the farmers of New Zealand on the National Council, and there has been no contact with your organisation and National Hydatids since that time of the Ad Hoc committee.

Well, what are the results up to date. They have been quite satisfactory. To start off with, in general, the co-operation of the dog owners in New Zealand has been marvellous, and I am sure that the reason for that co-operation has been very largely the result of the efforts of your people and your members, right throughout New Zealand. We men are very aware of the pressures that you women can apply.

In the early days, I think it was estimated that there were about 30% of the dogs in New Zealand that were infected with hydatids. In the first round of testing undertaken by the Hydatid Council, the figure had got down then through voluntary dosing and what have you, to about 18%. Last year the figure was 6.8%. I think you would agree, Madam President, that we have achieved a satisfactory measure of control. But there is one other point which gives us terrific encouragement and terrific heart, and I am sure it will to you too. In a recent report from the Health Department, and



to use their words 'there has been a substantial reduction in the number of children under the age of ten years, who have become infected with hydatids during the past five years.' That to us is most encouraging, and I am sure that you feel with us on that. On the question of offal savings, a question that concerns farmers very much, I am afraid I have no figures whatsoever to report, because we have not been able to get them. We have had indications from some meat operators at odd places in New Zealand, and the indications are quite good, particularly as regards true hydatids, but in some areas of New Zealand as regards false hydatids, there has been little improvement. However, in the absence of factual figures covering the whole of New Zealand, I can say we have got nothing to report. We do hope with the new system of meat inspection which will be coming into operation this year, that we will be able to get a better picture of just what the influence of the campaign will have as regards livers.

Now I did say that the figures last year were 6.8% that is of infected dogs. We are concerned at the fact that that figure has remained static for about 12 months, and we have reviewed our policy. We feel that we have achieved a satisfactory measure of control. That is as far as we have got. From now on, we will be focussing all our emphasis on the infected dog and treating him accordingly, and I think that will have its effect to reduce that incidence from 6% to nil. We have asked for supporting legislation, but I regret to say that although we asked for it about 18 months ago, we still haven't got it, and whether we get it or not will remain to be seen. We are asking all Local Authorities to step up their public relations, their publicity and so forth, and in this field, Madam President, I feel that you will be able to help a great deal, just as you did at the start of the campaign. We will be able to help you in this field—in the field of publicity quite a lot, and I would say, Madam President, that if your Local Authorities got in touch with the Hydatid Control Officers, or our National Office in Wellington, we will make available to you whatever material we have.

Now during the past five years, no doubt you have had join your ranks possibly hundreds of new mothers. Are they aware of the problems associated with the spread of hydatids? Are these new mothers aware of the pressure they can bring on their husbands who are dog owners, in the correct feeding and control of their dogs? I feel that you could give some thought to this point, and bring your new members up to date in this field. I see that you have asked that all dosing strips be adequately fenced to prevent small children playing on these areas. I don't know of anywhere else in New Zealand other than on a dosing strip is the excreta of a dog scooped up in a shovel and buried in a deep hole. It is not done in backyards, front lawns, farms, streets, parks, beaches, anywhere else, but it is done there. I don't know anywhere else in New Zealand that the known practical hygiene procedures are carried out after a dog is purged other than on a dosing strip. Another point that I would make, these dosing strips, where possible, it is not always possible, but where possible, are graded clear and clean so that when dosing time comes, it is easy to efficiently remove the purge. If they are fenced off, it will become virtually impossible to operate big grading machines. Also, could I report that at the present time, a trial is being carried out with a mobile dosing strip,

and if this proves satisfactory, I think it will answer all the worries and all the problems, whether they are justified or not, of many people.

However, at this stage it is simply under trial. I do hope it is successful, because it will save a lot of worry for a lot of people.

Another point. At the present time in rural areas, dosing is being carried out in the main three times a year. In many areas, it will be reduced to twice a year, so that the follow-up treatment for infected dogs can be carried out. There will be more dosing on properties, and I can see a general trend away as our incidence reduces from frequent dosing on strips.

Now I think, Madam President, all these points evolve around this remit you have before you, and I hope they will be helpful to you for your discussions on it.

Finally, can I say thank you very much for the opportunity of just briefly reporting to you. We have always been conscious in the National Council of the effort that you put in, particularly in the days of getting the campaign under way. We would like a continuation of that effort, which I am sure we will get."

**Mrs Ryburn** thanked Mr Parsons for his address, and asked if there were any questions.

**Mrs Grigg** (Hororata) asked whether there was any form of spray which could be used on dosing strips.

Mr Parsons stated that the only effective way of killing the hydatid egg was through heat. He said that in some cases, flame throwers were used, but this could not always be done, as there was, in some cases, a fire risk where grass strips were used, but the best practical known methods of hygiene were carried out. Unfortunately he said, there was nothing which was 100%, but the research people were working on it still, even though, after many years, they had been unable to find anything.

**Mrs Aburn** (Green Island) then moved, seconded by **Mrs Hessian** (Green Island) that all hydatid dosing strips be adequately fenced to prevent small children playing on these areas.

Mrs Aburn, in speaking to the motion, said that her branch had brought this forward as they were concerned about the young children. She felt that a notice was not always the best warning, because pre-school children and very young children cannot read the notice, and do not always understand when told not to go on to a particular strip of land. She said there had been cases of children playing on dosing strips, which were sometimes quite near to housing areas.

Quite a long discussion followed, during which various members from different parts of the country, instanced incidents which had occurred of people picnicking on or near such dosing strips without being aware that they were so doing.

Dr. Begg commented on Mr Parson's report, and said that the reduction in infected dogs was a great step forward, and although the point about dosing strips was valid and the Society should do what it could to make people realise that strips were not the places for picnics, the Society should not lose sight of the fact that the danger to children had been very much reduced by the tremendous efforts of Mr Parsons and his voluntary workers.



Some further discussion followed, in which it was suggested that the Hydatid Council arrange for notices uniform throughout the country, to be erected, so that people could recognise the sign in the same way as they recognise A.A. signs throughout the country.

After further discussion on this point, with the permission of Conference, the remit was worded as follows—

"That all hydatid dosing strips throughout New Zealand be marked clearly at both ends of the strip, with a signpost uniform for the whole country."

Mrs Aburn agreed to move the motion in its amended form, and this was seconded by Mrs Hessian.

The motion was then placed before the Conference and **carried**.

**Mrs Stewart** (Christchurch) seconded by **Mrs Rogers** (Otorohanga) then moved a further motion—"In view of the static state of the hydatid eradication programme, the Plunket Society urges the Government to step up all measures to assist the work of the Hydatid Council."

This motion was **carried unanimously**.

## NUCLEAR TESTS

**Mrs Horton** (Auckland) moved that Press publicity be given from the Plunket Society on behalf of the mothers of New Zealand, to the main French papers of France, indicating to the mothers of that country the dangers that could result from the proposed nuclear tests in the South Pacific to the future generations of this country.

On the motion of **Mrs Peryer** (Christchurch) seconded by **Mrs Evans** (Palmerston North), the Conference agreed that Mrs Horton should be allowed seven minutes to speak to this remit.

Mrs Horton, in speaking to the remit, said that for the past two decades, we can be said to have been living in the Atomic Age, but we were undoubtedly relieved when an agreement to cease nuclear testing was signed by the United States, Russia, and Great Britain. When France subsequently announced that a further series of nuclear tests would be carried out in the South Pacific in 1965, the words 'Atomic' and 'Radioactivity' did take on a more personal and ugly meaning. We are now within half a year of the appointed time, Mrs Horton said, and despite strenuous efforts by the United Nations and by our own Government, among others, it has become increasingly clear that President de Gaulle will not be deterred by appeals, 'ban the test' marches, or threats of trade embargo. He is determined that regardless of the consequences, these tests will proceed. Mrs Horton quoted statements made by responsible scientists.

Mrs Horton then went on to say that she felt that as mothers, members would not care to leave the physical wellbeing of future generations to chance and the vagaries of the weather. I believe, said Mrs Horton, that we, as The Royal Society for the Health of Women and Children, must act independently as a non-political body, and may just possibly succeed where others have failed. What we can do is to make sure that the French nation, and

indeed any other nation which plans tests in the future, clearly understands just what they could mean to unborn innocent children. Mrs Horton suggested that the Society could make a sustained effort to arouse the conscience of the nations in the following ways—

1. Letters to the Editors of the papers.
2. Carefully worded advertisements addressed to the mothers of the nation.
3. The institution of enquiries into possible intervention by His Holiness the Pope, as France is a Catholic nation.
4. To make certain that all our actions receive publicity in Britain and America, and anywhere else in the world that we can get.

Mrs Horton said she felt that all our efforts must be directed to the great French nation as a whole, and not to one man. She said that if this Conference agreed that we bring all our influence and efforts to bear on this matter, we may be able to help save further generations from needless and terrible destruction.

The motion was seconded by **Mrs Allan** (Auckland), who said that she felt that everyone must be very proud of Mrs Horton. She had taken a very wonderful stand, and she had spoken very nobly for us all.

**Mrs Peryer** (Christchurch) suggested that perhaps China could be added to the remit.

**Mrs Ryburn** suggested that if Mrs Horton agreed, the words 'to the main French papers of France, and if possible, of China, Communist China' be added.

The motion would then read—

"That Press publicity be given from the Plunket Society on behalf of the mothers of New Zealand, to the main French papers of France, and if possible, of Communist China, indicating to the mothers of these countries, the dangers that could result from the proposed nuclear tests in the South Pacific, to the future generations of this country."

The President stated that she thought that this rather weakened the motion, and suggested that the Conference take it on faith that Mrs Horton and the Executive would do their best to include China.

The motion in its original form was then placed before the meeting, and was **carried unanimously**.

## **ABANDONING OF CHILDREN**

**Mrs Foote** (Taupo) moved, seconded by **Mrs Gamble** (Paeroa) that the Government be requested to pass legislation constituting it an offence for anyone who has the custody, control, or charge of any child under the age of five years, to leave the child unattended in any motor vehicle or house.

In speaking to the motion Mrs Foote said she felt that most mothers would agree with her statement that to leave small children unattended in any house or motor vehicle did constitute a criminal offence, but according to the law, no person had the authority to intervene in such cases.



After some discussion of this remit, the Conference suggested that the words 'so as to cause the the child undue distress or bodily harm' be added to the remit. With the consent of Mrs Foote the motion was placed before the Conference in this form, and was carried.

### NURSING DIRECTOR'S ADDRESS

Miss J. G. Mackay, Director of Nursing Services to the Plunket Society, addressed the Conference as follows—

"First of all I would like to draw your attention to the fact that if you read your Annual Report, you will see that there were about 900 fewer babies born in New Zealand last year, but in spite of that fact, only 200 fewer babies came under Plunket supervision, and for the first time in history, the Plunket Society supervised the health and well being of over 90% of the children born.—90.56%. There were fewer babies and that gave some much needed relief to the nurses in very busy areas where they have been working at top speed for a long time. They are going to be able to use that extra time very well indeed because we hope, as Dr. Begg mentioned, to extend mothercraft teaching throughout the whole of the country.

I think that lots of our problems would disappear. We are always talking about the accidents which happen in homes, and we can't understand why they continue. I think that if we could talk to people before their children come along and have their homes ready to receive the children properly, then there would be fewer accidents. It is the young mother with her first baby who hasn't time to see that she has all the safety plugs etc., but if they are there beforehand surely many accidents would not happen.

Now in the past I have often talked about the work of the nurses in the field but I don't think I have said much about the work of the people who hold the more responsible positions within the Society—I am talking about nursing positions. I would like to say something about the responsibilities and work of the Hospital Matrons. They are responsible primarily for the care of the children in the hospital,—for the well being of the babies they must know exactly what the condition of each child is; they must be able to report accurately to the doctor. That is their greatest and most pressing responsibility, but in addition, they are responsible for training of Karitane nurses, and in two of the schools, for the training of Plunket nurses as well. Wherever you have people, you have problems of one kind or another, and they have to be most adaptable and tactful people, who can deal, not only with the nurses, the two age groups, in their Plunket Training Schools, the younger teenage girl, the Karitane nurse, the more mature person, who is already a well trained mature person, who has different problems from the other group. You all know of domestic problems which occur in hospitals, and the Matrons have to be able to cope with all these situations. Very often we find that they do their own administrative work: they stand in in the wards due to sickness or shortage of staff. They often do Karitane nurses' job, but luckily we have more Karitane nurses coming forward for training at the moment.

They have also the anxious parents to cope with, and I think we all feel that that is one of the major functions—to be able to

reassure and help the parents whose children are in hospital. I have not spoken much about the administrative side of the job. Beside the actual arranging of duties for the nurses and domestic staff, they have responsibilities to Head Office—they have to return reports giving details of the work carried out, the work with the babies, with the training and the statistics which we require so we can return good reports to the Society, and keep our eye on things and suggest improvements where necessary. I think the Matrons are the salt of the earth. I did the job for a couple of years, but I couldn't stand it any longer than that! Also, they must work with Committee members. I know they often seem like people who are prodding you to do things and provide better amenities, but when they do that, it is in the interests of the children, who are the patients. They have high ideals and high standards and they like to encourage you to help them to live up to those standards.

The next group I would mention are the Provincial Supervisors. They have a job which is quite different. They cover large areas and they travel from branch to branch. It is to the Provincial Supervisor that the Plunket nurse turns for advice, and I think that without the Provincial Supervisors, we would probably have a very sketchy rural service. The plan is that when a new nurse is appointed to a district, the Supervisor should be in touch with her as quickly as possible, to find out the major problems and help to solve them. From there on, the Supervisor is obliged to visit each nurse in her area at least once in six months, and more frequently should the need arise. In addition, she is the link between the nursing service and the committee member. You should all know where your Provincial Supervisors live, and if you have any problems dealing with nursing service, contact them, and ask to talk the matter over with them. Some problems are more easily solved at a local level.

In the four main Cities we have Charge Sisters whose functions are similar to those of the Provincial Supervisor. They are the people who arrange the work of the nurses. They must also arrange the itineraries of the nurses so that the nurse time is spent where it is required, also for forwarding statistics and information we require at Head Office. They manage well, but they need your help and support. Your help is absolutely invaluable. Now I have told you of some of the things the nurses do in the Society. I have told you all this before, but I would like to say this again, and that is—thank you all for the hard work you do, which makes it possible for the nurse to do her job.”

Mrs Findlay (Pahiatua) expressed the thanks of Conference to Miss Mackay for her address.

### HEAD OFFICE BUILDING

The President introduced Mr P. O. Smellie, a member of the Dominion Executive. Mrs Ryburn said that Mr Smellie had been invited to report to the Conference on the progress already made towards the erection of the new Head Office building. Before asking Mr Smellie to speak, however, Mrs Ryburn said she had an important announcement to make—“the building fund had been increased by an anonymous gift of £9,000.” This statement received an enthusiastic reception, and the Conference expressed its ap-



preciation of this generous and encouraging gift by spontaneous acclamation.

Mrs Ryburn then called upon Mr Smellie to address the Conference.

Mr Smellie submitted an Architect's drawing of the front elevation of the building, to give an impression of the type of building which is to be erected. He went on to say—

"I think it is a year ago that I came to Wellington and spoke to the Council members, when we were first considering a building for Head Office in Dunedin, arising from the fact that our present premises will be required by the owners before very long. From that, we conceived the idea of having a home of our own, and I think everybody would agree, with the standing of the Plunket Society throughout New Zealand, and the size of its organisation, the amount of administration which it has to do, and the people who do it, that a home of its own is fully justified. We were fortunate in getting an option on this section across the road from where we are at the present time. There were two old houses occupied by tenants who have been there for many years. We have, with the approval of the present owners, the University of Otago, been able to give notice to the tenants; we have been able to provide them with alternative accommodation so that no injustice or injury was done to anybody. A contract has been let for the demolition of these houses, and will be shortly carried out.

The Architects, Messrs. Fraser, Oakley & Pinfold, have been working on the plans for the building over the last 12 months, and Mr Oakley is the member of the partnership who has the scheme under his control. We have been working to a very tight timetable as we have to get the building completed by the end of next year and everything had to go with clockwork precision to bring that about. Mr Oakley has devoted pretty well the whole of his time over the last two or three months on our project. He has completed his plans for the building, and the Quantity Surveyors have taken out the whole of the quantities of the various materials required—the steel, cement etc. The contract has been let in this case on a rather different basis. The quantities of everything required in the building have been taken out, and the builders who will tender are being asked to submit a tender based on unit prices for the materials required. It works out to an overall price in the end, but they have to give a schedule showing how much they charge for doing the concrete work and the steel work, and the lining work and so on. One of the advantages of this is that I think it saves time, and also it gives a certain amount of flexibility in the construction of the building. If you want to make an alteration, it is a very simple matter to amend the contract by adjusting the quantities of the different materials required.

The Architect is about to invite builders in Dunedin to register with him if they are willing and able to enter into competition—to put in tenders for the erection of the building. This is being done almost immediately, and he expects to be in a position to advertise for tenders on 13th November. The date for the closing of tenders will be fixed as 7th December, and it is hoped to have a contract let within one week from that date, so that the successful tenderer will have the Christmas and New Year vacation in which to organise

himself for the job. The Contract will contain provisions for penalties for exceeding the time and bonuses for beating the time, so every encouragement is being given to the builder to do the job within the specified time which is exactly one year from the date of letting the contract. If everything goes according to plan, we should have this building completed by Christmas 1965. I think that will be an outstanding achievement in timing alone, apart from any other aspect of the scheme.

We have, of course, had to provide in the plan for the housing of our Headquarters' staff, and that took a certain amount of time. It was at one stage, like trying to put a quart into a pint pot, and it looked as if we were going to have a bit of trouble but in the end, everybody was more or less satisfied and the top floor of the building has been subdivided in a way that fits in with the requirements of the Society, and will provide a very modern and very handsome suite of offices for Headquarters staff. It consists of a Board Room and a Dominion Secretary's office, and there is, in this space, a folding Modernfold door between the two, so that the whole can be opened up into one large Executive or Board Room for larger meetings. There is a room for the Treasurer. There are two rooms for clerks. There is a Duplicating Room. There is a room for the Nursing Director, for typists, for a First and Second Nursing Assistant and the Medical Advisor has a suite consisting of: his own room, a Waiting Room adjoining, his Secretary's office is next door to him, and alongside him a room for research. In addition to all that, there is a Staff Room for the morning and afternoon tea breaks. The plan is here, and if any of you ladies would like to have a look at it it is available, and I think you will agree that it is a very complete and satisfactory set up for the Head Office. We are hoping, of course, that in 1966 you will all be able to come down and have a look at it.

Now in regard to some details of the building itself. You may possibly have some of this information, but perhaps I could go over it again. It will be located in George Street, on the eastern side between Frederick and Albany Streets, on a property almost opposite the Old Knox Church manse which currently constitutes the Headquarters of the Society. The building will be free standing on the property with space all round it, and will consist of four floors plus a basement. The total floor space will be 18,000 square feet. The building will be constructed in reinforced concrete utilising the latest techniques and will consist basically of a central core which runs right through the building and contains the stairs, lifts, cloak room and service ducts. The floor space around it will be completely unrestricted and will receive very good natural light and ventilation. The lifts and stairs will carry through to the basement which contains parking at the rear and extensive storage. The building is set back from the street to minimise traffic noise and the area in front of the building will be developed as a Court to provide a space where cars and taxis can pause to allow passengers to alight in safety. A drive will encircle the building, giving access to the car parking at the rear, and to the storeroom underneath the building. Externally the building will be faced with white precast concrete panels.

The foyer and lift lobbies of the ground floor which is the entrance to the building, and also of the fourth floor, which is the



entrance to the Society's offices, will be lined with an Italian marble. It is cream in colour, is very attractive, and I think will make a very handsome approach.

On our section we will have six car park sites under the building—covered sites. We will have four outdoor sites at the back of the building, and on the adjoining section we will have an additional eight car park sites—so altogether we will have something like eighteen car park sites available for the tenants of the building. Already that is proving to be quite an attractive feature when we are discussing tenancies with prospective tenants. For the adjoining area with the eight car parks we have taken a 20 year lease at a rental of £100 a year, and we are asking 15/- a week for each car park, and three have been taken by one of the tenants.

Now in regard to the tenancies. The whole of the ground floor has been let to two Doctors, who carry on a Pathologists Laboratory and Clinic. For that they are paying £1 a foot for the space on the ground floor, and they are paying 7/6 for 230 feet of storage underneath.

On the first floor we are negotiating with the Government and if this contract is finalised, they will pay 16/- a foot for 1800 feet, 460 feet of storage at 7/6, two covered car parks at £1 a week, so their rental would be £1,626 a year. The combined rental then from the two tenancies is £4808.

It is not easy to get people interested in taking space in a building which is still in the blueprint form. However, I am confident that once we let the contract and can assure people that occupancy will be available at the beginning of 1966, we will be able to let the balance of space and the figures which we presented to you in the circular sent out, will be maintained in the leasing.

Now I come to the final question I was going to speak about, and this is a very important one. How the funds are to be provided. We are working so far on an Architect's estimate of cost of £125,000. As you know, since then there has been a rise of 6% in wages in the General Award and this estimate may be on the low side in the face of changed conditions. How is this amount to be found? I think we have told you in the circular that we had £35,000 of Society funds arising from the Radio-Telephone Appeal invested in Government Stock and we have Council's authority to put that into this new building. We hope to raise for the Kathleen Rapps Memorial Fund £10,000. At the present that fund stands at £4,411. We hope to raise as a special building fund £15,000 and it is towards that £15,000 that the President has announced an anonymous donation of £9,000. Now if we reach those targets of £10,000 and £15,000, we will require £65,000 plus from the branches. Already we have either applications or promises of £26,000, so altogether we have in hand or in sight, £74,411 against the estimated cost of £125,000 plus. Now as you know, we have appealed to you to find the £65,000 for the mortgage debenture issue which we have arranged. I just want to speak about that for a moment. We made a survey of branch and sub-branch resources, and I think we found that between all of you, you had something like £120,000 in various forms, in banks, in deposits or investments and we felt that it was not unreasonable to expect you to let us have a little

over half of that towards this project which is something in which you are all interested, and which is going to be for the benefit of every branch and sub-branch of the Society. Dunedin branch has promised to let us have £20,000 from their Endowment Fund and to do that they have to realise investments which they have at the present time, but they feel that their money is very much better used in the interests of the Society in this building project, particularly as the interest is assured and repayment is assured at any time the money is required. When we decided to ask the branches to finance this, I realised the first thing you were going to say would be if you put your money into this building, how were you going to get it out again, if it was required for your own purposes, and that was a very fair and reasonable question. At that stage, we went to The Karitane Products Society, who, as you know, are the manufacturers of 'Karilac' etc. The President and I met their Board of Directors, and put our case before them. They have agreed to provide funds from their own resources for any branch or sub-branch that wishes to take its debenture money out at any time, if we have not the funds available to pay it out. Now, that means that you have an absolute guarantee that if you invest in this security, you can at any time, on giving three months' notice, be sure you can get it back. You are assured of 5% interest, which is as good, if not better, than the rate you are getting at the present time for your investment, and you are doing a great service to the Society by helping us with this project. Once we have let this building, we should be able to put aside £2000/£3000 a year out of the rents to pay the building off, and that is without charging the Plunket Society a penny more for these magnificent premises they are going into, than what they are paying at the present time. I want to stress that point—we felt that whatever financial plans we entered into we must avoid, if possible, any scheme which was going to increase the rental on the Plunket Society's premises, and therefore increase the levy which they have to impose upon you. So there will be no increase in the levy, and when the mortgage is paid off, there should be a surplus of £3,000 to £4,000 a year from the building which will go into the annual financial budget of the Society, and will, to that extent, relieve branches and sub-branches of money which they would otherwise have to find. I want to put it to you most strongly today, that first of all you have a good return for your money, you have good security for it, as good as you will get anywhere else, you have an absolute assurance of liquidity, so that you can get your money out at any time when you may need it, either wholly or in part, and finally, you are doing something which is going to be a great help to the Society at the present time, and will ultimately be a great benefit to the branches and sub-branches in the dividend that you are going to get in the future.

Now, we are about to enter into the contract, and we are doing that in faith and confidence in you, to produce the balance of the money to enable us to complete the job.

I just want to tell you of another arrangement we have made. This £25,000 which we are hoping to raise on these appeals and for which we already have £13,000—this is gift money. This is the donations, the special appeals, the Kathleen Rapps and the Building Appeal from which we are hoping to get £25,000 on which no interest would be payable at all. It is all gift money. Now we can't expect to raise



that all in 12 months, yet when the building is completed, we have to pay it out in 12 months. So we had to find some way of being sure that that money would be available to pay the builders when they had completed the job, and we approached a group of supporters and well wishers of the Society in Dunedin, and I am pleased to be able to tell you that this anonymous group has agreed to find £25,000 for five years, free of interest.

Now I think I have covered everything, but I would be very pleased to answer any questions that anybody would like to ask. This is a fairly complicated transaction and a big one from the Society's point of view, but I think we've got it 'pretty well sewn up' provided you help us, of course. As you may imagine, all this has entailed a great deal of work and thought over the last 12 months. We've had conferences with all sorts of people. We have had to set up a special Building Committee of the Dominion Executive, who have had to meet and be prepared to meet at very short notice to confer with the Architect about all the questions that have to be answered, when an Architect is planning a building, and particularly in regard to the Society's own premises. We have had great support and help from everybody associated with it, and I would like particularly to refer to Mr Oakley, the Architect, who has devoted himself to this in a way that no professional man could be expected to do, unless he had a keen personal interest in the whole project—and he has that. I would like to express appreciation to the Building Committee for their time and trouble—to The Karitane Products Society Ltd. for the way in which they have helped us—to the group of people who have agreed to underwrite the £25,000 which was a most valuable contribution to the whole scheme—and to all those people who have made donations to the two funds, the Building Appeal Fund of £15,000, and the Kathleen Rapps Memorial Fund of £10,000."

**Mrs Horton** thanked Mr Smellie on behalf of the Conference for the work he had put into the project.

**Mrs Allan** (Waipawa) moved, seconded by **Mrs Segar** (Devonport) that Conference approves and supports the work which is to be carried out by the Society.

**Carried.**

The Conference adjourned at 12.30 p.m.

#### **AFTERNOON SESSION, THURSDAY, NOVEMBER 5, 1964**

The Conference reassembled at 2.30 p.m.

#### **PLUNKET MOTHERS' CLUBS**

**Mrs Cathro** (Ngaruawahia) moved, seconded by **Mrs Ordish** (Carterton) that Rule 1 (a) Plunket Mothers' Club Rules should read as follows:—

"Any mother with a baby or pre-school child who is a financial member of a local branch or sub-branch."

Speaking to the remit, **Mrs Cathro** suggested that before a mother attends a Plunket Mothers' Club meeting, she should be asked to pay a subscription.

**Mrs Spackman** (Napier) said that she was quite sure that if

young mothers were not financial when they joined the Plunket Mothers' Clubs, they would eventually become financial. She said she did not think the Society was in a position to turn down any young mother who would like to join the Mothers' Club. The more mothers interested in the Clubs, the better.

**Mrs Gully** (Nelson) spoke of the Plunket Mothers' Club in her district, and said that she did not want to have to say to them that they must be financial members of the Society before they could join the Mothers' Club. She said a good percentage of the girls were financial members, because they had been led to it, and not forced.

The general discussion revealed that most members were of the opinion that young mothers should not be forced to become financial before joining a Plunket Mothers' Club.

The motion was put to the Conference and lost.

### GOVERNMENT FINANCIAL AID

**Mrs McCombs** (Christchurch) expressed appreciation to the Dominion Executive for allowing this remit to come at this particular time, which, she said, may not necessarily be the most opportune time. She then moved that a request be made to the Government for greater financial aid to enable the Society to extend its work, and also to reduce the demands made on the local committees.

Mrs McCombs stated that this remit had been submitted for discussion by a group of young mothers, of whom she had the privilege to be President. She said that a third of them were under thirty, and that they had 45 children among them. Fifty percent are pre-school children, and a high percentage of the remainder are still in the primers. She felt that the changing climate of the present day social environment was having a serious effect on the Plunket committees, and more and more of the older women are returning to their careers, and those who are not doing so, are finding their time claimed by other charitable organisations. She felt that there is a danger of over-burdening the very section of the community for whom Plunket was first founded. Mrs McCombs went on to explain some of the activities undertaken in her sub-branch, but had to conclude her statement, as time was called by the time keeper.

**Mrs Peryer** (Christchurch) seconded this motion.

**Lady Wright** (Dunedin) suggested that she felt the Society could not possibly ask the Government for financial assistance, since only that morning, Conference was discussing the new Headquarters building, and was then talking in terms of thousands of pounds for the building fund.

Before putting the motion to the Conference, the President said that the Society would be asking for assistance from the Government, but in other ways, and only when the Council feels that it is right and proper to seek assistance. She said the matter would be kept in mind, as timing was of the utmost importance. She said that her sympathies were with the Christchurch



branch, but she was of the opinion that the time was not right at this juncture to seek Government assistance.

The motion was put to the Conference and **lost**.

## POSTERS FOR PLUNKET WAITING ROOMS

**Mrs Deaker** (Dunedin) moved, seconded by **Mrs Frengley** (Dunedin) that the Dominion Executive prepare a poster for Plunket waiting rooms, advising the necessary action in cases of accidental poisoning of children.

**Dr. Begg** spoke to the Conference on this matter, and said that although he did not disagree with the idea of a poster, he did feel that in many cases, mothers would not remember the wording. He drew the attention of members to the small leaflet in "Plunket News" which had been prepared in conjunction with Dr. McQueen, the first Director of the National Poisons Register, and said that this could be cut out, and kept in the home. However, he felt that the best way in the case of poisoning was to rush the child to the doctor or hospital. Dr. Begg then referred to the remit dealing with the printing of antidotes in telephone directories. He said, again, that although the idea in itself was sound, in many cases, the antidotes mentioned might not be in the home or local store, and again, the only answer was the nearest doctor or hospital.

The motion was put to the Conference and **lost**.

With the permission of Conference, the following remit was withdrawn by the Nelson Branch—

"That a list of poisons and antidotes be listed in alphabetical order in Mothercraft and telephone directories throughout the country."

## FOLDING PUSH CHAIRS

**Mrs Grear** (Nelson) moved, that it be suggested to the manufacturers of the folding push chair, that they follow the American pattern, which has a longer wheel base, with a fixed shopping carrier level with the back axle; the footrest the full width of the chair, with the front wheels under the footrest and on a swivel. This obviates the present liability of the push chair, with a parcel carrier attached to the handle, tipping when laden with parcels.

The motion was seconded by **Mrs Gully** (Nelson).

Speaking to the motion, Mrs Grear said that although she had been unable to bring an actual chair to the Conference to enable members to realise its advantages for themselves, she did have a picture of the chair. Mrs Grear went on to state that with the present models of push chairs, many accidents had occurred with the prams tipping when parcels were attached, and with children getting feet caught in the spokes of the wheels. The chance of this type of accident occurring with the type of pram described, would be eliminated.

The motion was then put to the Conference and **carried**.

## REMITTS WITHDRAWN

With the permission of Conference, the following remits were withdrawn—

Submitted by the Auckland Branch —

“That branches and sub-branches review the amount of their contribution annually to the Plunket Security Fund, and when possible, donate as much as funds will allow.”

Submitted by the Morrinsville branch—

“That the minimum subscription remain at five shillings per annum and in addition, a levy be made of one shilling per visit.”

Submitted by the Milford sub-branch—

“That the Dominion Council give serious consideration to a token charge being levied on mothers for services rendered by the Plunket Society.”

## COT BLANKETS

**Mrs Hall** (Springs Ellesmere) moved that an approach be made to manufacturers to make a larger cot blanket for convenience in handling and laundering and from the point of view of economy. Size to be between present cot size and single bed size and to be called ‘Baby enveloping blanket.’

This motion was seconded by **Mrs Blackmore** (Springs Ellesmere).

There was considerable discussion on this remit, the general opinion being that the larger cot blankets were available, but that in many cases mothers did not know of this.

**Miss Mackay** suggested that the Society should run a further campaign, advising young mothers that these larger cot blankets were available.

With the permission of **Mrs Hall** (Springs Ellesmere), the remit was altered to read—

“That steps be taken to inform young mothers of the availability of larger cot blankets for convenience of handling and laundering, and from the point of view of economy.”

The motion was then put in this form, and **carried**.

## HOT WATER TAPS

Moved **Mrs Grear** (Nelson), seconded **Mrs Goldie** (Nelson) that Master Plumbers be asked that hot water taps over baths be placed on the inside of baths, so that they cannot be reached by small children.

**Mrs Grear** said that her branch felt that many accidents could be avoided if the taps were out of reach of small children.

The motion was put to the meeting and **carried**.



## FENCING—NEW HOUSING AREAS

Moved **Mrs Peryer** (Christchurch), seconded **Mrs Stewart** (Christchurch) that owing to the number of accidents occurring to children running out into the streets of new housing areas, where there are no fences, this danger be brought to the notice of the parents.

The President suggested that she was not sure how this remit could be implemented, but perhaps committee people could warn parents in the area about the dangers.

The motion was put to the Conference and **carried**.

## WOMEN'S REST ROOMS

**Mrs Hodgkinson** (Nelson) moved, seconded by **Mrs Hunt** (Nelson) that those in control of Women's Rest Rooms be requested to review the regulations to provide for a raising of the present age limit for small boys accompanied by mothers to be permitted in the Rooms.

Mrs Hodgkinson explained some of the difficulties facing mothers of little boys who had travelled to the town from country areas, and she felt that these little boys should be permitted to accompany their mothers to Rest Rooms when necessary.

Various members presented problems on this subject to the Conference.

The motion was placed before the Conference and **carried unanimously**.

## PLUNKET NURSES' UNIFORM

**Mrs Robertson** (Rodney), seconded by **Mrs Papworth** (Rodney) moved that Plunket nurses' uniforms be modernised.

Mrs Robertson, in speaking to the remit, said that she felt the time had come for a brighter uniform to be adopted by the Society. She said she felt that many girls found the grey very depressing and dull, and with a change of colour, she felt that recruitment to the Society would be improved.

**Miss Mackay** explained that she had sent out a questionnaire to all nurses inviting them to state whether they preferred to retain the present colour, and if not, to state the colour of their choice, both for the winter and for the summer uniform. 65% of the nurses had stated that they would prefer to have the uniform retained in the grey, although some of the nurses had suggested that perhaps the style could be modernised. Of the 35% stating they would like a change of colour, the shades suggested had ranged from purple, green, blue, brown etc. Miss Mackay pointed out that there was no objection to any nurse having her costume tailored to suit her own requirements.

After a good deal of discussion, the motion was put to the Conference and was **carried**.

## CHAIR OF PAEDIATRICS AND CHILD HEALTH

The President drew the attention of the Conference to the fact that in New Zealand, there was no Chair of Child Health and Paediatrics. She stated that the Society was very conscious of the fact that we needed to keep our children in good health, and yet we had no Chair. A Chair of this nature was to be found in practically all Medical Schools in the Commonwealth, except New Zealand. Some time ago the Press publicity regarding the fact that Government had granted permission to set up new Chairs in the Medical School, one of them being a Chair of Paediatrics and/or Child Health, was, however, somewhat misleading, as the University of Otago felt it did not have the money to follow this up. The President invited Dr. Begg to speak on this matter.

**Dr. Begg** said he could confirm what the President had said, and said, too, that he felt that the Chair of Child Health was the very foundation of medical education in infant welfare and paediatrics, and that without this, we would inevitably fall behind other Commonwealth countries. He said that a high proportion of the work of a medical practitioner was with children, and for that reason, a Chair of Child Health is of fundamental importance in the training of medical students. This subject had been placed before Sir George Finlay at the time of the Commission. As far as he knew, continued Dr. Begg, the establishment of the Chair had been approved by every authority from the top to the lowest level and yet New Zealand still had no Chair. He felt that it was a national disgrace that New Zealand did not have a Chair of Child Health filled and working at this time. He suggested that the Society should do its utmost to help those people who wished to fill the Chair and do so at the first possible moment and with the greatest urgency.

After some further discussion on this subject **Miss McLean** (Napier) moved seconded by **Mrs Hall** (Springs Ellesmere)—

"That the Plunket Society urges the Government to implement its decision to set up a Chair of Child Health and Paediatrics at the University of Otago as recommended by the Finlay Report, by providing a special grant for this purpose."

This motion was **carried unanimously**.

## FOUNDER'S DAY

Mrs Ryburn informed the Conference that it had been hoped to have Mr Baker, a member of the Dominion Executive at the Conference. Mr Baker had submitted some suggestions for combining Founder's Day, May 14, in a type of Dominion-wide day so that there would be publicity throughout New Zealand on behalf of the Society. Mr Baker, however, had had to go overseas just prior to the Conference, and it was decided that consideration of this matter should be held over in the meantime. Mrs Ryburn said that branches and sub-branches would be informed of any decision which the Executive may make on this subject.



## VENUE OF NEXT CONFERENCE

**Mrs Deaker** (Dunedin) extended an invitation on behalf of the Dunedin branch for the next General Conference of the Society to be held in Dunedin. It was unanimously agreed that the invitation should be accepted, and that the General Conference in 1966 would be held in Dunedin.

## BUILDING FUND

The Dominion Secretary informed the Conference that the following branches and sub-branches had indicated that assistance would be given to the Building Fund as follows:—

Blenheim Branch £2,000 in 1967 Plus £200/250 for Kathleen Rapps Memorial Fund.

Invercargill Branch Loan £300

Ohura sub-branch Loan £200

Temuka Branch Loan £100

Geraldine Branch Loan. But not certain of amount.

Palmerston North Branch Loan £3,000 plus £100 Kathleen Rapps Memorial Fund already given.

Waimate Branch Loan £300

Te Awamutu Branch Loan £1,000 first year's interest to Kathleen Rapps Memorial Fund.

Timaru Branch Loan £1,000 first year's interest to Kathleen Rapps Memorial Fund.

Gisborne Branch Loan £1,000

Te Horo Sub-branch Loan £60

Paraparaumu Sub-branch Loan £100

Kapiti Sub-branch Loan £100

Kaikoura Branch Loan £300

## VOTES OF THANKS

The Dominion President said she knew all those who were present would agree that the Conference had been a great success. She then called upon **Mrs Deaker** (Dunedin) to thank the Wellington branch. On the motion of **Mrs Deaker**, a vote of thanks to the Wellington branch and sub-branches, and other branches in the Wellington area for the immense amount of work undertaken in organising the Conference and catering arrangements was **carried with acclamation**.

**Mrs Simmons** then moved a vote of thanks to Mrs Ryburn for her competent and inspiring chairmanship of the Conference, and this was **carried with acclamation**.

The Conference closed at 4.30 p.m.





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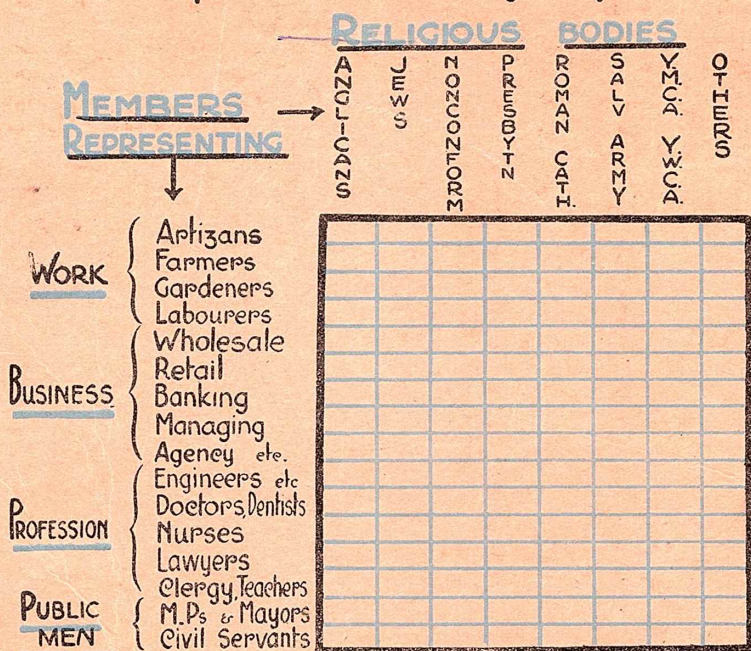
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# THE PLUNKET SQUARE

Make & keep the Committees fully representative



Directly a member drops out put another in.  
City Branches need Suburban Representatives.

## EXPLANATION.

The above diagram was prepared by Sir Truby King in order to keep before the General Conference the supreme importance of making and keeping the Committee-women of every Branch of the Plunket Society thoroughly representative of the whole local community.

Sir Truby King explained that the scheme he now presented had been used as the original basis for ensuring that every new Committee would be as broad and complete as local circumstances permitted. However, as time went on and original members fell out, there was always the risk that some important class or religious persuasion might no longer be represented on the Committee; and the only way to prevent this was to be vigilant, and restore the balance as soon as possible.

With this in view he had prepared the PLUNKET SQUARE in its present form; and he trusted that every Branch would go over the list of its Committee, on the lines indicated, so as to make sure of its being always as complete and representative as possible. Indeed, the Government would naturally expect this—quite apart from its being the original policy of the Society, as an educative and helpful association for all classes alike.